

EMERGENCY MEDICAL SERVICES AUTHORITY

10901 GOLD CENTER DR., SUITE 400
 RANCHO CORDOVA, CA 95670
 (916) 322-4336 FAX (916) 324-2875



December 20, 2022

Jackie Lowther, EMS Director
 Santa Clara EMS
 700 Empey Way
 San Jose, CA 95128

Dear Ms. Lowther,

This letter is in response to Santa Clara County Emergency Medical Services (EMS) Agency's 2020 EMS plan submission to the EMS Authority on February 28, 2022. The EMS Authority has reviewed the plan, based on compliance with statutes, regulations, and case law. It has been determined that the plan does not meet all EMS system components identified in Health and Safety Code (HSC) § 1797.103 and, therefore, is not approved.

The area that indicates the plan is not concordant and consistent with HSC statutes, California Code of Regulations (CCR), and case law is indicated below.

Approved	Not Approved	
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<u>System Organization and Management</u>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<u>Staffing/Training</u>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<u>Communications</u>
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<u>Response/Transportation</u>

A) EMS Area/Sub-Area Exclusivity:

The information provided in the Santa Clara 2020 EMS Plan related to the EMS sub-area "County of Santa Clara" shows as exclusive under HSC § 1797.224. This EMS sub-area was deemed non-exclusive by the EMS Authority in April 2017 due to the rescission of the approval of Santa Clara's competitive process #PHD 10-06 and confirmed again in April 2021 (enclosed). If Santa Clara EMS Agency wants this EMS sub-area to be exclusive, a new competitive process consistent with HSC 1797.224 needs to be completed.

B) Advanced Life Support Agreements:

Santa Clara County EMS Agency has not submitted documentation to confirm that agreements consistent with CCR Title 22, § 100168(b)(4); are in place for Advanced Life Support (ALS) with the following entity:

- 1) Palo Alto Fire Department

J. Lowther
December 20, 2022
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- | | | |
|-------------------------------------|--------------------------|--|
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <u>Facilities/Critical Care</u> |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <u>Data Collection/System Evaluation</u> |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <u>Public Information and Education</u> |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <u>Disaster Medical Response</u> |

Pursuant to HSC § 1797.105(b), the 2020 Santa Clara EMS Plan may not be implemented. If you desire to appeal the EMS Authority's denial of the plan to the Commission on EMS, please notify the EMS Authority in writing within 15 days of your receipt of this letter, and the EMS Authority will schedule the appeal hearing process with the Office of Administrative Hearings.

If you have any questions, please contact Tom McGinnis, EMS Division Chief at (916) 431-3695.

Sincerely,

Tom McGinnis

//for//
Elizabeth Basnett, EMEDM
Acting Director

Enclosure

AW: mo

EMERGENCY MEDICAL SERVICES AUTHORITY

10901 GOLD CENTER DR., SUITE 400
RANCHO CORDOVA, CA 95670
(916) 322-4336 FAX (916) 322-1441



April 14, 2017

Jackie Lowther, EMS Director
Santa Clara EMS Agency
700 Empey Way
San Jose, CA 95128

Dear Ms. Lowther,

Thank you for meeting with us on March 21, 2017, to discuss our concerns regarding changes to the implementation of the approved competitive process for the County of Santa Clara Zone. We had previously met with representatives of Santa Clara County EMS (SCEMS) and County Counsel on April 1, 2014, and again on October 31, 2014, to discuss our concerns about implementation of the approved Request for Proposal (RFP), and to make recommendations for future competitive processes that include methods to ensure a fair process implemented by the local EMS agency.

The Emergency Medical Services Authority (EMS Authority) is charged with providing direction and supervision over emergency medical services, including creation of exclusive operating areas that limit competition. This role of the EMS Authority ensures that a fair competitive process is conducted at periodic intervals and that the contractual terms are maintained to provide state action immunity to local governmental entities when they create exclusive operating areas (Health & Safety Code, Section 1797.6, 1797.85 and 1797.224). A fair and transparent competitive process, with oversight by the EMS Authority, is required to eliminate anti-competitive conduct or practices by companies and local governmental entities initially and throughout the term of the contract.

As part of the evaluation of the Santa Clara County 2015 EMS Plan review, the EMS Authority identified that the contract to implement SCEMS's 2010 RFP #PHD-10-06 has had six (6) amendments over the course of 6 years, including a 3 year extension. This led us to specifically review the amendments to the contract between SCEMS and Rural/Metro (now owned by AMR) to determine if the implementation was consistent with the RFP as it was originally approved.

As a result of this review, we have determined that there have been significant changes to the contract to implement the approved RFP that change the assumptions and economic conditions upon which all bidders relied upon in good faith when responding to the original competitive process. These specific amendments and provisions significantly decrease the costs and increase the revenue to the selected provider beyond what was included in the approved RFP, and therefore constitutes a failure to implement the EMS plan as approved.

In this instance, the major contract provisions in the amendments that alter the economic conditions of the RFP include, but are not limited to, the following:

Decrease in Costs to the Provider

- Liquidated damages, penalties and similar measures forgiven or changed by the County valued up to \$7 million
- Removal of Franchise Fees of \$1.5 million for existing 3 year contract period
- Removal of Communication Fee Increase Language, saving \$200,000 per year
- Addition of Waiver of Liquidated Damages Language for 92% response time compliance
- Relinquishing the requirement of replacing ambulances, estimated savings of \$5 million

Increase in Revenue to the Provider

- Base Rates and Mileage Fees of 10%

Since the amendments, as noted above, significantly alter the previously approved solicitation, the current contract is no longer representative of the original requirements and assumptions upon which bidders constructed their responses. The changes noted in the amendments decrease the costs and increase the revenue to the provider of between 20-25% of the annual revenue of the contract (from \$75 million to \$55 million). Therefore, the approved RFP and ensuing operational contract, as implemented by SCEMS to date, does not ultimately provide a fair and level playing field for all bidders, and consequently the EMS Authority cannot continue our prior approval of the competitive process as part of the local EMS plan.


The following three determinations have been made by EMSA based upon the circumstances:

1. The EMS Authority is rescinding its approval of RFP #PHD 10-06, as part of the 2010 EMS plan, effective immediately, for failure to continue to implement the RFP as approved;
2. The EMS Authority is staying the decision to rescind until June 30, 2019. This effectively means that SCEMS must initiate and complete a new competitive process if the local EMS agency wishes the sub-area to continue to be an exclusive operating area past June 30, 2019, and to receive state action immunity.
3. The EMS Authority will not be able to approve the 2015 EMS plan until such time as a revised plan and timetable for a new competitive process has been submitted. A separate letter regarding the 2015 EMS plan will be sent separately.

Santa Clara EMS Agency
April 14, 2017
Page 3 of 3

If you have any questions, please contact Laura Little, Transportation Coordinator at (916) 431-3677.

Sincerely,

A handwritten signature in black ink that reads "Howard Backer". The signature is written in a cursive, flowing style with a long horizontal stroke at the end.

Howard Backer, MD, MPH, FACEP
Director

HB:ll

EMERGENCY MEDICAL SERVICES AUTHORITY

10901 GOLD CENTER DR., SUITE 400
RANCHO CORDOVA, CA 95670
(916) 322-4336 FAX (916) 324-2875



April 2, 2021

Jackie Lowther, EMS Director
Santa Clara EMS Agency
700 Empey Way
San Jose, CA 95128

Dear Ms. Lowther,

The Emergency Medical Services Authority (Authority) is in receipt of your email dated March 4, 2021, regarding the 8th Amendment to the contract with Rural/Metro of California, Inc.

The Authority is charged with providing direction and supervision over emergency medical services, including creation of exclusive operating areas that limit competition. As part of this role, the EMS Authority ensures that a fair and competitive process is conducted at periodic intervals and that the contractual terms are maintained in the creation of exclusive operating areas (Health & Safety Code, Section 1797.6, 1797.85 and 1797.224). A fair and transparent competitive process, with oversight by the EMS Authority, is required to eliminate anti-competitive processes and/or practices by companies or local governmental entities initially and throughout the term of the contract.

After review of Santa Clara County's 8th Amendment to competitive process #PHD 10-06 that you provided to the Authority, the Authority's 2017 determination that the Santa Clara County Ambulance Zone shall remain a "**Non-Exclusive**" operating area until a new competitive process has been completed is unchanged.

Santa Clara's 8th Amendment:

"G. WHEREAS, on June 22, 2020, the Superior Court of California declared the requirements for solicitations relied upon by EMSA to approve or deny EOAs to be underground regulations and issued a writ of mandate ordering EMSA not to use or enforce such requirements unless and until it promulgates them as regulations in compliance with the California Administrative Procedure Act (APA); and

H. WHEREAS, as of the effective date of this Eighth Amendment EMSA has not promulgated regulations in accordance with the order of the court."

Authority's Response: The rescission of the approval of Santa Clara's competitive process #PHD 10-06 was not based on prior EMSA published guidelines or any provisions that have subsequently been deemed to be underground regulations. The Superior Court's ruling in the recent litigation between EMSA and the California Fire Chiefs Association is also inapplicable to the rescission of the approval of the competitive process as submitted by Santa Clara.

Santa Clara's 8th Amendment:

"I. WHEREAS, the County and Rural/Metro now desire to further modify the Original EMS Contract, as amended by the First through Seventh Amendments (the "EMS Agreement"), to (i) extend the term of the Agreement to ensure stability within the EMS System during the COVID-19 pandemic, (ii) reinstate the County's EOA to the extent permitted by law.

H. WHEREAS, as of the effective date of this Eighth Amendment EMSA has not promulgated regulations in accordance with the order of the court."

Authority's Response: An operating area that was created through a competitive process, per Health & Safety Code § 1797.224, that has been changed to a non-exclusive status, cannot arbitrarily revert to an exclusive status without a new competitive process. There is no authorization in Regulation, Statute, or case law that would allow this situation to occur. As stated above, based on the April 14, 2017, letter, the area will be listed by the Authority as **Non-Exclusive**.

If you have any questions, please contact Laura Little, Transportation Coordinator, at Laura.Little@emsa.ca.gov.

Sincerely,



Dave Duncan MD
Director



Louis Bruhnke
Chief Deputy Director



Santa Clara County

EMS Plan

2020

**This plan was prepared for the
California Emergency Medical Services Authority
August 2021**

Plan prepared by:

County of Santa Clara
Emergency Medical Services Agency
700 Empey Way
San Jose, CA 95128
(408)794-0600

Plan reviewed and edited by:

Ken Miller, MD, PhD, EMS Medical Director
Jackie Lowther, RN, MSN, MBA, EMS Director
John Blain, EMS Specialist

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Executive Summary

Pursuant to California Health and Safety Code §1797.200, the County of Santa Clara elected to develop an emergency medical services program. In accordance with State statute §1797.204, the Santa Clara County Emergency Medical Services Agency (SCCEMSA) is submitting the 2020 EMS Plan.

Like most LEMSAs, EMS activities in 2020 were focused on COVID19 pandemic response and mitigation activities. Throughout the pandemic, SCCEMSA was able maintain normal LEMSA business operations and fulfill its statutory mission.

In 2020, there were several operational changes within the SCCEMSA system since the last EMS Plan submission. The SCCEMSA system operates two emergency ambulance zones. In October 2020, SCCEMSA reclassified one previously non-exclusive ambulance zone back to an exclusive ambulance zone. The second change involved the addition of one basic life support inter-facility ambulance service. The third operational change occurred when one of the system's EMT training programs closed its operations.

The SCCEMSA system includes eleven emergency departments, three adult trauma centers, two pediatric trauma centers, one burn center, ten primary stroke centers, four comprehensive stroke centers and eight STEMI centers.

Future efforts by SCCEMSA will focus on the development and implementation of the recently enacted Chapter 14 regulations (EMS for Children). SCCEMSA envisions full implementation by the close of fiscal year 2022.

FORM 1:

EMS PLAN SYSTEM ASSESSMENT SUMMARY

A. SYSTEM ORGANIZATION AND MANAGEMENT	Minimum Standard		Objective If standard not met, explain how and when standard will be met.
	Meets	Does Not Meet	
1.01 Organizational Structure	✓		
1.02 EMS Administration Budget	✓		
1.03 Employment of Medical Director	✓		
1.04 Medical Control	✓		
1.05 Expert Consultation	✓		
1.06 Public Input on Plans, Policies, Procedures	✓		
1.07 Establishment of Policies, Procedures, Protocols	✓		
1.08 Availability of Policies, Procedures, Protocols	✓		
B. MANPOWER AND TRAINING	Minimum Standard		Objective If standard not met, explain how and when standard will be met.
	Meets	Does Not Meet	
2.01 EMT & AEMT Certification in Central EMT Registry	✓		

B. MANPOWER AND TRAINING (cont.)	Minimum Standard		Objective If standard not met, explain how and when standard will be met.
	Meets	Does Not Meet	
2.02 EMT & AEMT Discipline	✓		
2.03 EMT & AEMT Certification Status	✓		
2.04 EMT & AEMT Certification Reporting to National Practitioners Database	✓		
2.05 Paramedic Accreditation	✓		
2.06 RN & MICN Standards	✓		
2.07 EMT, AEMT, Paramedic Training Program Compliance	✓		
2.08 EMT Training Course Challenge	✓		
2.09 EMS Provider Reporting of EMT & AEMT Actions or Omissions	✓		
2.10 Reporting of Paramedic Actions or Omissions	✓		

B. MANPOWER AND TRAINING (cont.)	Minimum Standard		Objective If standard not met, explain how and when standard will be met.
	Meets	Does Not Meet	
2.11 Suspension of Paramedic License	✓		
2.12 Prophylactic Medical Treatment for Public Safety Personnel, Lifeguards, EMTs, AEMTs, & Paramedics	✓		
2.13 Critical Care Paramedic Training & Accreditation	✓		
2.14 Training Standards for EMTs & Paramedics Managing Complex Patients	✓		
2.15 Procedures for Management of Complex Patients	✓		
C. COMMUNICATIONS	Minimum Standard		Objective If standard not met, explain how and when standard will be met.
	Meets	Does Not Meet	
3.01 Review and Approval of Medical Dispatch Centers	✓		
3.02 City and Fire District Dispatch	✓		
3.03 Medical Dispatch Center Protocols	✓		

C. COMMUNICATIONS (cont.)	Minimum Standard		Objective If standard not met, explain how and when standard will be met.
	Meets	Does Not Meet	
3.04 EMD Certification	✓		
3.05 Medical Communication System Plan	✓		
3.06 Emergency System for Inter-hospital Communication	✓		
D. RESPONSE AND TRANSPORTATION	Minimum Standard		Objective If standard not met, explain how and when standard will be met.
	Meets	Does Not Meet	
4.01 Primary Response Area	✓		
4.02 Provider Selection	✓		
4.03 Authorization of Advanced EMT & Paramedic Service Providers	✓		
4.04 Advanced Life Support Provider Application	✓		
4.05 Response Time Standards	✓		
4.06 System Status Management	✓		
4.07 Creation of Exclusive Operating Area and Approval	✓		

E. ASSESSMENT OF HOSPITALS AND CRITICAL CARE CENTERS	Minimum Standard		Objective If standard not met, explain how and when standard will be met.
	Meets	Does Not Meet	
5.01 Hospital and Health Facility Designation	✓		
5.02 Acute Care Facility Assessment and Specialty Care System Development		✓	The County does not have a policy or process in place for designating pediatric receiving centers. The County plans to complete the policy and designation processes in 2020 was delayed due to COVID pandemic. The designation policy will be release in 2021.
5.03 Patient Safety and Non-Permit Facility in Rural Area	N/A		
5.04 Critical Care System	✓		
F. DATA COLLECTION AND EVALUATION	Minimum Standard		Objective If standard not met, explain how and when standard will be met.
	Meets	Does Not Meet	
6.01 Data Management System Compliancy with CEMISIS/NEMSIS	✓		
6.02 Electronic Health Record Data	✓		
6.03 Integrated Data Management System using CEMISIS/NEMSIS	✓		
6.04 Electronic Patient Health Information Exchange	✓		

F. DATA COLLECTION AND EVALUATION (cont.)	Minimum Standard		Objective If standard not met, explain how and when standard will be met.
	Meets	Does Not Meet	
6.05 Prehospital EMS and Specialty Care Data through CEMISIS/NEMSIS	✓		
6.06 EMS QA/QI Program	✓		
6.07 EMS Service Provider QI Program	✓		
6.08 EMS Quality Core Measures	✓		
6.09 Ambulance Patient Offload Times	✓		
6.10 Data Collection from Specialty Care Centers	✓		
G. PUBLIC INFORMATION AND EDUCATION	Minimum Standard		Objective If standard not met, explain how and when standard will be met.
	Meets	Does Not Meet	
7.01 Public Information Improvement	✓		
7.02 Program for Public Awareness of EMS System	✓		
7.03 Public Training on First Aid, Bleeding Control, CPR	✓		

G. PUBLIC INFORMATION AND EDUCATION (cont.)	Minimum Standard		Objective If standard not met, explain how and when standard will be met.
	Meets	Does Not Meet	
7.04 Public Education on Injury and Illness Prevention	✓		
7.05 Public Training and Education on Disaster Preparedness	✓		
H. DISASTER MEDICAL RESPONSE	Minimum Standard		Objective If standard not met, explain how and when standard will be met.
	Meets	Does Not Meet	
8.01 Multi-Casualty Response Plans Using ICS/SEMS	✓		
8.02 Medical Response Plans	✓		
8.03 Distribution of Disaster Casualties	✓		
8.04 MHOAC Coordinator	✓		
8.05 Situation Status Reporting & Communication of Emergency Requests	✓		
8.06 Identification of EMS Resources	✓		
8.07 Medical Mutual Aid Agreements	✓		

H. DISASTER MEDICAL RESPONSE (cont.)	Minimum Standard		Objective If standard not met, explain how and when standard will be met.
	Meets	Does Not Meet	
8.08 Disaster Medical Training of EMTs & Paramedics	✓		
8.9 Integration of Hospitals' Disaster Emergency Plan	✓		
8.10 Development of Medical & Health Disaster Plan	✓		
8.11 Hospital Evacuation	✓		
8.12 Increase in Prehospital EMS Needs	✓		
8.13 Specialty Care Center Role in Disasters	✓		
8.14 Mutual Aid Requests in EOA Areas	✓		

FORM 2:

EMS PLAN SYSTEM ASSESSMENT OF STANDARD

MINIMUM STANDARD:

5.02: [Acute Care Facility Assessment and Specialty Care System Development]

Pursuant to Chapter 14 regulations, the local EMS agency may develop and implement an Emergency Medical Services for Children (EMSC) Program.

EMS AGENCY CURRENT STATUS IN MEETING STANDARD:

The Santa Clara County EMS Agency currently has an in-county trauma system that include two pediatric trauma centers. The EMS Agency will begin the process in FY21 to develop an in-county designation of non-trauma pediatric receiving centers. The designation process will follow Chapter 14 regulations. The designation policy rollout was delayed due to the COVID pandemic. It is anticipated that the local policy will be implemented in late fiscal year 2022.

EMS AGENCY COORDINATION WITH OTHER AGENCIES:

The EMS Agency will coordinate development and implementation with in-county stakeholders and neighboring county stakeholders. Stakeholders include but are not limited to, hospitals, first responder agencies, ground and air transport providers.

FORM 3:

AMBULANCE OPERATING ZONE SUMMARY

Date: CY 2020

Local EMS Agency or County Name:

County of Santa Clara, Emergency Medical Services Agency

Area Description: (e.g., Zone 1, Zone A)

Title: All areas of Santa Clara County excluding the City of Palo Alto and the "Stanford Lands" parcel.

Geographic Description: (Also attach map)

Current Provider Name: (include legal, fictitious, and dba)

Rural/Metro of California, Inc; subsidiary of AMR/Global Medical Response

Exclusive **Non - Exclusive**

Type of Exclusivity (HSC § 1797.85): (Check all applicable boxes)

Emergency Ambulance **Advanced Life Support (ALS)** **Limited Advanced Life Support (LALS)**

Scope of Operations: (Check one box)

- | | |
|---|---|
| <input checked="" type="checkbox"/> 9-1-1 Emergency Ambulance | <input type="checkbox"/> 7-Digit Emergency Ambulance |
| <input type="checkbox"/> ALS Ambulance | <input type="checkbox"/> All ALS Ambulance Services
(9-1-1, 7-Digit, IFT) |
| <input type="checkbox"/> All CCT/ALS Ambulance Services
(CCT, 9-1-1, 7-Digit) | <input type="checkbox"/> BLS Non-Emergency Services
(IFT) |
| <input type="checkbox"/> Critical Care Transport | <input type="checkbox"/> Standby Service with Transport Authorization |
| <input type="checkbox"/> All Emergency Services
(9-1-1, 7-Digit, IFT, CCT, Non-Emergency, Standby Transportation) | <input type="checkbox"/> Other

_____ |

Method to Achieve Exclusivity, if applicable (HSC § 1797.224):

No Competitive Process:

(If requesting to grant exclusivity without a competitive process for current providers, please complete the Non-Competitive Process EOA Provider Checklist and attach.) The LEMSA shall submit documentation, pursuant to §100450.59(c)(6)(A).

Provide a description of the ambulance dispatch process for the EMS area and subareas.

Provide a description of the system status management plan for the EMS area and subareas.

Provide a description of how ambulance service is provided to any portion of the EMS area not under the jurisdiction of the LEMSA due to Federal autonomy, which includes military bases, national parks, and some tribal reservations, pursuant to pertinent federal statute and state statutes.

Competitive Process:

List contract dates 07/01/2011 - 06/30/2024 [with three year extension option]
(Submit a copy of the request for proposal and signed contract, if not previously submitted.)

If this information is unchanged and the plan has been previously approved by the EMS Authority, it is not necessary to re-submit.

Manner and Scope

Has there been any change in manner and scope since the last approved EMS plan?
(e.g., boundary changes, ownership changes)

Yes *(Attach detailed explanation)* **No**

Appendix B – Non-Competitive Process EOA Provider Checklist (September 2009)

In accordance with Health and Safety Code section 1797.224, a local EMS agency may consider allowing EOAs to providers without a competitive process. Please complete the following documentation in support of a request to grant exclusivity to a provider without a competitive process. Any missing or incomplete submissions may affect the EMS Authority’s ability to make a determination regarding eligibility.

<p>1. Operating Area Name and Description: <i>(Attach map including adjacent zones.)</i></p>
<p>2. Has a competitive process ever been conducted in this area?</p> <p><input type="checkbox"/> Yes <i>(If yes, provide the following)</i> <input type="checkbox"/> No</p> <p>Provider: _____</p> <p>Start Date: _____</p> <p>Length of Agreement: _____</p>
<p>3. Type of Service:</p> <p><input type="checkbox"/> Emergency <input type="checkbox"/> ALS <input type="checkbox"/> LALS</p>
<p>4. Organization Name: <i>(include legal, fictitious, and dba)</i></p>
<p>5. Address:</p> <p>Headquarters: _____ _____</p> <p>Operational: _____ _____</p>
<p>6. Type of Organization:</p> <p><input type="checkbox"/> Corporation <input type="checkbox"/> Partnership</p> <p><input type="checkbox"/> Public Agency <input type="checkbox"/> Joint Powers Authority</p>
<p>7. Month/Year Service Began:</p>
<p>8. Breaks in Service, if applicable: <i>(Include length of each break, reason, and how zone(s) were serviced during the break.)</i></p>

9. Any change in zone boundaries/service area since January 1, 1981? If so, please provide the following:

- a) Describe and include population affected:
- b) Attach clearly labeled maps illustrating boundary changes.
- c) Include call volume data for affected area(s) and list data source:
- d) List any providers affected by the change:
- e) Include prior call volume data and projected call volume following change.

10. Any change in ownership? For each change since January 1, 1981, please provide the following:

- a) List changes in names:
- b) List dates of ownership changes: *(Include all applicable copy of contracts and/or sale/transfer agreements.)*
- c) Disposition of assets: Were all assets transferred to new owner(s)?
 Yes No *(If no, provide an explanation)*
- d) Transfer of employees: Were all employees hired by new owner(s)?
 Yes No *(If no, provide an explanation)*
- e) Disposition of accounts payable and receivable: Were accounts payable and receivable transferred?
 Yes No *(If no, provide an explanation)*

11. Since January 1, 1981, have any other providers served all or part of this zone? If so, please answer the following:

- a) Are the providers currently in operation?

Yes No

List all providers and their level of service: *(emergency, ALS, BLS)*

- b) If the provider(s) no longer serve the area, list their level of service, dates of service, and reason for termination of service.

Date: CY 2020

Local EMS Agency or County Name:

County of Santa Clara, Emergency Medical Services Agency

Area Description: (e.g., Zone 1, Zone A)

Title: All areas of the City of Palo Alto and the "Stanford Lands" parcel.

Geographic Description: (Also attach map)

Current Provider Name: (include legal, fictitious, and dba)

City of Palo Alto

Exclusive **Non - Exclusive**

Type of Exclusivity (HSC § 1797.85): (Check all applicable boxes)

Emergency Ambulance **Advanced Life Support (ALS)** **Limited Advanced Life Support (LALS)**

Scope of Operations: (Check one box)

- | | |
|---|---|
| <input checked="" type="checkbox"/> 9-1-1 Emergency Ambulance | <input type="checkbox"/> 7-Digit Emergency Ambulance |
| <input type="checkbox"/> ALS Ambulance | <input type="checkbox"/> All ALS Ambulance Services
(9-1-1, 7-Digit, IFT) |
| <input type="checkbox"/> All CCT/ALS Ambulance Services
(CCT, 9-1-1, 7-Digit) | <input type="checkbox"/> BLS Non-Emergency Services
(IFT) |
| <input type="checkbox"/> Critical Care Transport | <input type="checkbox"/> Standby Service with Transport Authorization |
| <input type="checkbox"/> All Emergency Services
(9-1-1, 7-Digit, IFT, CCT, Non-Emergency, Standby Transportation) | <input type="checkbox"/> Other

_____ |

Method to Achieve Exclusivity, if applicable (HSC § 1797.224):

No Competitive Process:

(If requesting to grant exclusivity without a competitive process for current providers, please complete the Non-Competitive Process EOA Provider Checklist and attach.) The LEMSA shall submit documentation, pursuant to §100450.59(c)(6)(A).

Provide a description of the ambulance dispatch process for the EMS area and subareas.
The City of Palo Alto provides ambulance and emergency medical dispatching (EMD) through the City's public safety answering point (PSAP).

Provide a description of the system status management plan for the EMS area and subareas.
The City of Palo Alto deploys two ALS ambulances 24/365. Additionally, the City of Palo Alto is able to deploy two additional ambulances through cross-staffing of firefighting apparatus.

Provide a description of how ambulance service is provided to any portion of the EMS area not under the jurisdiction of the LEMSA due to Federal autonomy, which includes military bases, national parks, and some tribal reservations, pursuant to pertinent federal statute and state statutes.

Ambulance services is provided to the federal entity when requested by the federal entity.

Competitive Process:

List contract dates _____.

(Submit a copy of the request for proposal and signed contract, if not previously submitted.)

If this information is unchanged and the plan has been previously approved by the EMS Authority, it is not necessary to re-submit.

Manner and Scope

Has there been any change in manner and scope since the last approved EMS plan?
(e.g., boundary changes, ownership changes)

Yes *(Attach detailed explanation)* **No**

Appendix B – Non-Competitive Process EOA Provider Checklist (September 2009)

In accordance with Health and Safety Code section 1797.224, a local EMS agency may consider allowing EOAs to providers without a competitive process. Please complete the following documentation in support of a request to grant exclusivity to a provider without a competitive process. Any missing or incomplete submissions may affect the EMS Authority's ability to make a determination regarding eligibility.

<p>1. Operating Area Name and Description: <i>(Attach map including adjacent zones.)</i></p> <p>All areas of the City of Palo Alto and the "Stanford Lands" parcel.</p>
<p>2. Has a competitive process ever been conducted in this area?</p> <p><input type="checkbox"/> Yes <i>(If yes, provide the following)</i> <input checked="" type="checkbox"/> No</p> <p>Provider: <u>City of Palo Alto</u></p> <p>Start Date: <u>1976</u></p> <p>Length of Agreement: <u>N/A; No agreement executed.</u></p>
<p>3. Type of Service:</p> <p><input checked="" type="checkbox"/> Emergency <input type="checkbox"/> ALS <input type="checkbox"/> LALS</p>
<p>4. Organization Name: <i>(include legal, fictitious, and dba)</i></p> <p>City of Palo Alto</p>
<p>5. Address:</p> <p>Headquarters: <u>250 Hamilton Avenue</u> <u>Palo Alto, CA 94301</u></p> <p>Operational: <u>250 Hamilton Avenue</u> <u>Palo Alto, CA 94301</u></p>
<p>6. Type of Organization:</p> <p><input type="checkbox"/> Corporation <input type="checkbox"/> Partnership</p> <p><input checked="" type="checkbox"/> Public Agency <input type="checkbox"/> Joint Powers Authority</p>
<p>7. Month/Year Service Began: 1975</p>
<p>8. Breaks in Service, if applicable: <i>(Include length of each break, reason, and how zone(s) were serviced during the break.)</i></p> <p>None</p>

9. Any change in zone boundaries/service area since January 1, 1981? If so, please provide the following: None

- a) Describe and include population affected:
- b) Attach clearly labeled maps illustrating boundary changes.
- c) Include call volume data for affected area(s) and list data source:
- d) List any providers affected by the change:
- e) Include prior call volume data and projected call volume following change.

10. Any change in ownership? For each change since January 1, 1981, please provide the following: None

- a) List changes in names:
- b) List dates of ownership changes: *(Include all applicable copy of contracts and/or sale/transfer agreements.)*
- c) Disposition of assets: Were all assets transferred to new owner(s)?
 Yes No *(If no, provide an explanation)*
- d) Transfer of employees: Were all employees hired by new owner(s)?
 Yes No *(If no, provide an explanation)*
- e) Disposition of accounts payable and receivable: Were accounts payable and receivable transferred?
 Yes No *(If no, provide an explanation)*

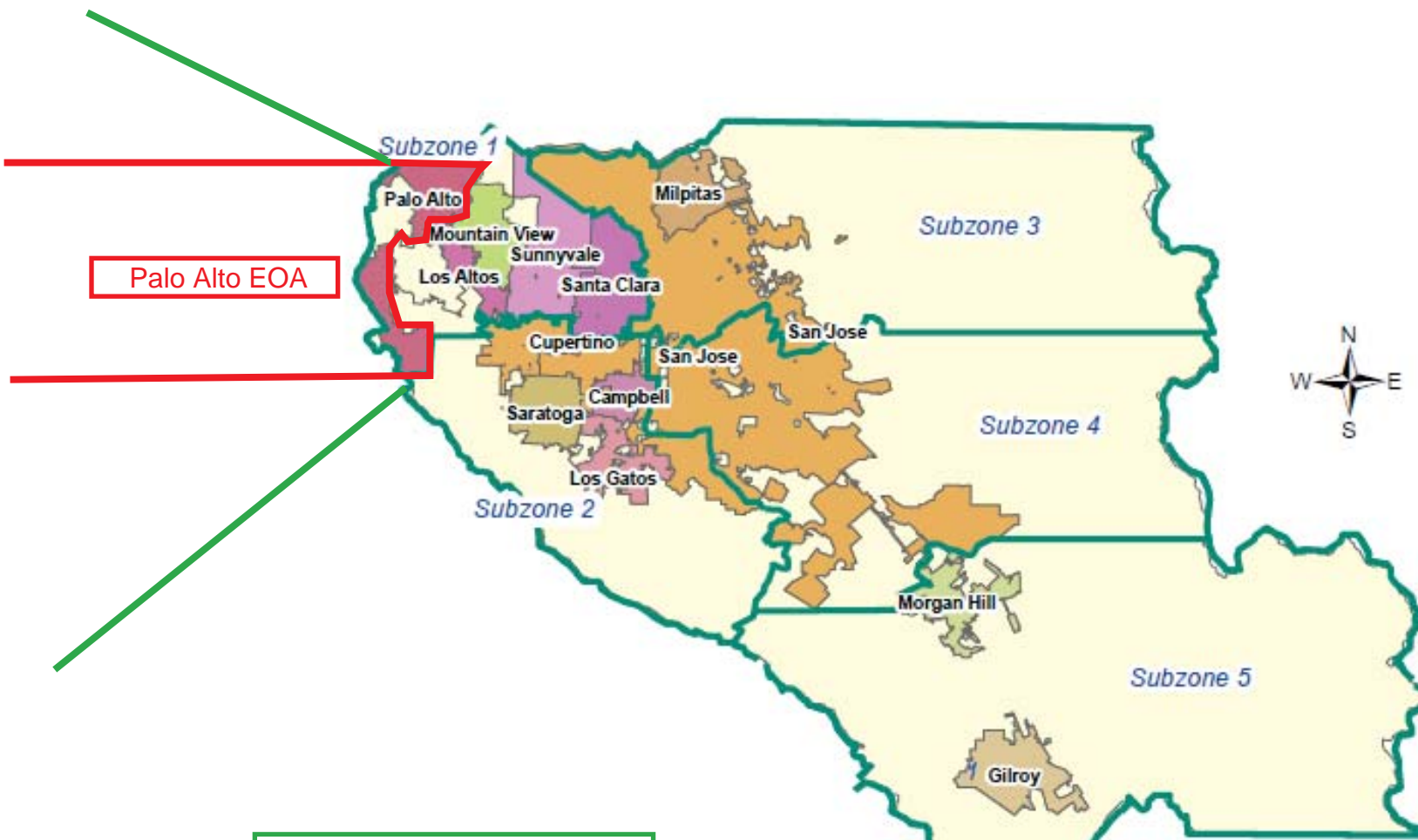
11. Since January 1, 1981, have any other providers served all or part of this zone? If so, please answer the following:

a) Are the providers currently in operation?

- Yes No

List all providers and their level of service: *(emergency, ALS, BLS)*

b) If the provider(s) no longer serve the area, list their level of service, dates of service, and reason for termination of service. N/A



Palo Alto EOA

Santa Clara Co. EOA SZ 1-5

- Subzone 1: Los Altos Hills, Los Altos, Mountain View, Sunnyvale and unincorporated areas Loyola, Moffet Field
- Subzone 2: Campbell, Cupertino, Los Gatos, Monte Sereno, San Jose (West), Saratoga and the unincorporated areas of Burbank, Redwood Estates
- Subzone 3: Milpitas, San Jose (North), Santa Clara
- Subzone 4: San Jose (East, South)
- Subzone 5: Gilroy, Morgan Hill and unincorporated areas San Martin

TABLE 1:
SYSTEM ORGANIZATION AND MANAGEMENT

EMS Agency Overview

Local EMS Agency: County of Santa Clara, Emergency Medical Services Agency

Plan Year: CY 2020

EMS Director/Administrator: Jackie Lowther, RN, MSN, MBA

EMS Medical Director: Ken Miller, MD, PhD

Physical Address: 700 Empey Way
San Jose, CA 95128

Type of Agency: County Health Services Agency
 Public Health Department
 Joint Powers Agency
 Non-Health County Department
 Private Non-Profit Entity

Number of Counties in Local EMS Agency: 1

Counties within Regional Agency: _____

Population of EMS system: 2.0 million

Local EMS Agency responsibility: Hospital Preparedness Program
 Public Health Emergency Preparedness Program
 Other: _____

EMS Agency Organization

Organizational Charts Attached: County Structure EMS Agency

EMS Agency Budget

Fiscal Year: FY 2020

Expenses for EMS agency administration services only:

Expense Category	Total
Salaries and Benefits (not contracted staff)	\$ 3,312,479.37
Contract Services	\$ 352,512.07
Services and Supplies	\$ 930,113.89
Total Expenses*	\$ 4,595,105.33

EMS Agency Budget (cont.)

Revenue received for EMS agency administration services only:

Revenue Category	Total
County General Fund (local tax funds, county health realignment funds, etc.)	\$ 2,118,456.96
County Health Realignment Funds	\$ 0.00
Maddy EMS Fund (LEMSA discretionary funds only)	\$ 267,133.46
Grant Revenue	\$ 43,174.07
Fees	\$ 1,246,593.94
Other:	\$ 919,746.90
Total Revenue*	\$ 4,595,105.33

Provide brief explanation if totals do not equal: _____

EMS Agency Fee Structure

Effective Date of Fees: July 1, 2019

	Item	Fee	Comment
Certifications	First responder certification	\$ N/A	
	First responder re-certification	\$ N/A	
	EMS dispatcher certification	\$ N/A	
	EMS dispatcher re-certification	\$ N/A	
	EMT certification	\$ 50	
	EMT recertification	\$ 50	
	EMT accreditation	\$ N/A	
	EMT re-accreditation	\$ N/A	
	AEMT certification	\$ N/A	
	AEMT recertification	\$ N/A	
	Paramedic accreditation	\$ 150	
	Paramedic re-accreditation	\$ N/A	
	MICN/ARN certification	\$ N/A	
	MICN/ARN recertification	\$ N/A	
Program Approval	EMR training program approval	\$ N/A	
	EMT training program approval	\$ 1,000	
	AEMT training program approval	\$ N/A	
	Continuing education provider	\$ 1,000	
	Paramedic training program approval	\$ 5,000	
	EMS dispatch program approval	\$ N/A	
	MICN/ARN training program approval	\$ N/A	

EMS Agency Fee Structure (cont.)

	Item	Fee	Comment
Designation	Base hospital application	\$ N/A	
	Base hospital designation	\$ N/A	
	Emergency receiving center designation	\$ 11,576.25	
	Pediatric facility approval	\$ N/A	
	Pediatric facility designation	\$ N/A	
	STEMI/Cardiac center application	\$ N/A	
	STEMI/Cardiac center designation	\$ 11,576.25	
	Stroke center application	\$ N/A	
	Stroke center designation	\$ 11,576.25	
	Trauma center application	\$ N/A	
	Trauma center designation	\$ 115,762.50	
	Other	Ambulance licensure	\$ 6,366.94
Ambulance vehicle permits		\$ 1,099.75	
Ambulance franchise fee		\$ N/A	
Paramedic course tuition		\$ N/A	
Other: Ambulance licensure _____		\$ 6,945.75	ALS / CCT ambulance service

EMS Agency Staffing

Total full-time equivalent (FTE) staff dedicated to EMS administration: 20

Roles	Classification	Contract (Yes/No)	FTE	Annual Salary Range	Actual Annual Salary	Benefits (% of Salary)	Benefits (Cost)
EMS Administrator	EMS Director	No	1	\$ 243,625.98	\$ 243,625.98	47 %	\$ 114,504.21
Asst./Deputy EMS Administrator	N/A	N/A	0	\$ 0	\$ 0	0 %	\$ 0
EMS Medical Director	EMS Medical Director	No	1	\$ 291,892.64	\$ 291,892.64	47 %	\$ 137,189.54
EMS Coordinator	N/A	N/A	0	\$ 0	\$ 0	0 %	\$ 0
EMS Specialist	EMS Specialist	No	10	\$ 131,097.92	\$ 131,097.92	47 %	\$ 61,616.02
CQI Coordinator	N/A	N/A	0	\$ 0	\$ 0	0 %	\$ 0
Trauma Coordinator	Specialty Program Nurse Coordinator	No	1	\$ 171,435.68	\$ 171,435.68	47 %	\$ 80,574.77
EMS Analyst	N/A	N/A	0	\$ 0	\$ 0	0 %	\$ 0
Senior Procedures Analyst (IT)	N/A	N/A	0	\$ 0	\$ 0	0 %	\$ 0
Administrative Assistant	Administrative Assistant	No	1	\$ 63,968.84	\$ 63,968.84	47 %	\$ 30,065.35
Office Assistant III	Office Asssitant III	No	2	\$ 56,408.04	\$ 56,408.04	47 %	\$ 26,511.78
Executive Assistant	Executive Assistant I	No	1	\$ 69,290.52	\$ 69,290.52	47 %	\$ 32,566.54
Sr. Management Analyst	Senior Management Analyst	No	1	\$ 120,057.60	\$ 120,057.60	47 %	\$ 56,427.07
Epidemiologist	Epidemiologist II	No	1	\$ 92,912.04	\$ 92,912.04	47 %	\$ 43,668.66
N/A	N/A	N/A	0	\$ 0	\$ 0	0 %	\$ 0

Emergency Medical Services (EMS) Agency Organizational Chart

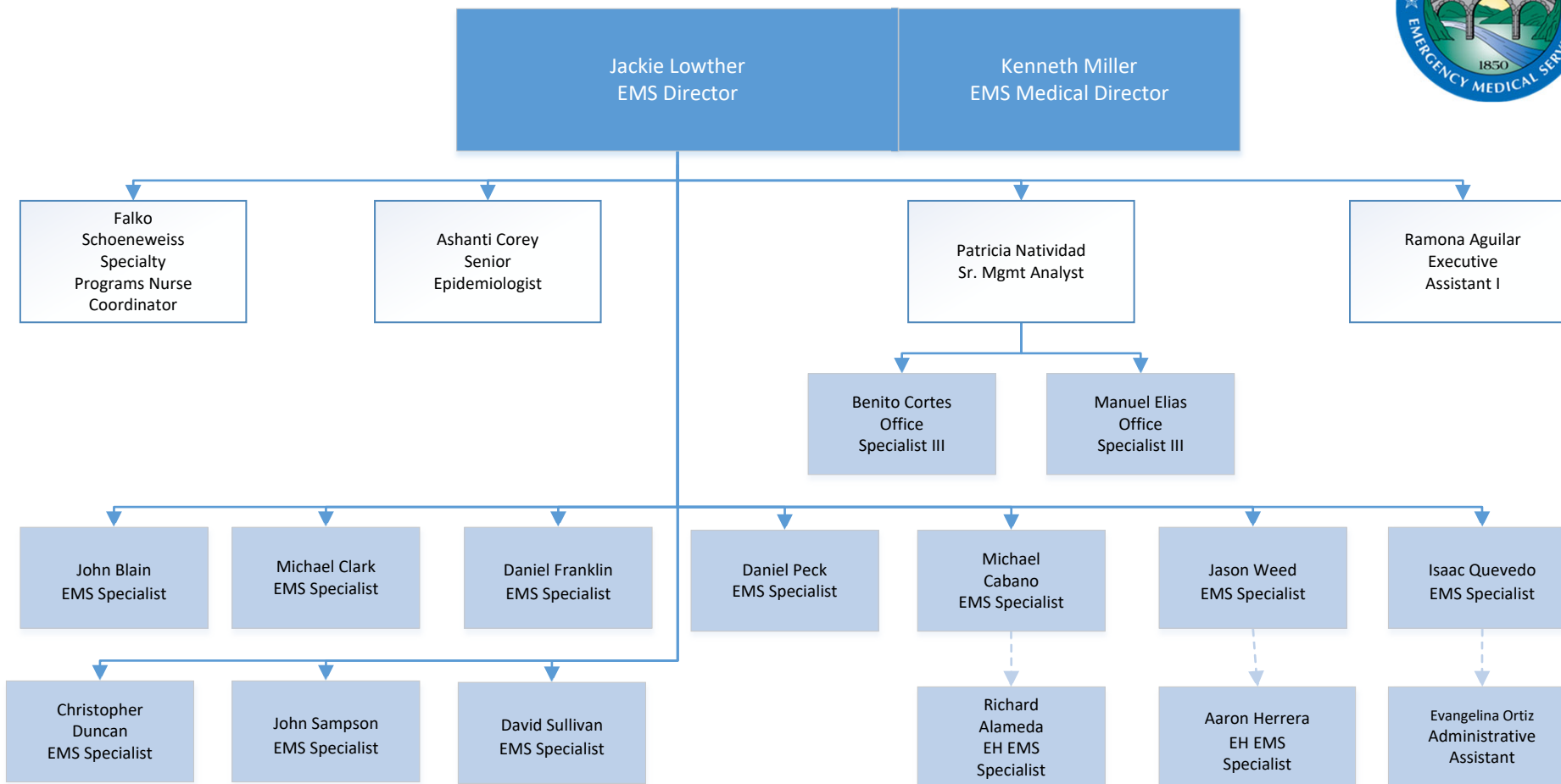


TABLE 2:
MANPOWER AND TRAINING

County: Santa Clara

Reporting Year: CY2020

EMS Agency Training Program

Do you have a process for approving EMS education programs and for monitoring and withdrawing approvals of the EMS education programs to ensure continued compliance with statute? Yes No

Do you have an EMR Training Program? Yes No

EMS Agency Certification

	EMT - I	EMT - II	EMT - P	MICN	NON-EMT – I (Public Safety)
Total certified	1,141	N/A		38	
Number newly certified this year	345	N/A		0	
Number recertified this year	796	N/A		28	
Total accredited on July 1 of reporting year	1,141	N/A	561	38	
Number of certification reviews resulting in:					
• Formal investigations	2	N/A		0	
• Probation	2	N/A	0	0	
• Suspensions	0	N/A	0	0	
• Revocations	0	N/A		0	
• Denials	0	N/A		0	
• No action taken	2	N/A	0	0	
Number of personnel authorized/certified in:					
• Early defibrillation	1,141				Not Documented

Available Training

CY 2020

Continuing Education Number: <u>43-0001</u>	Expiration Date of Training Program: <u>12/31/2099</u>
Student Eligibility: <u>Open to general public</u> (Open to general public or restricted)	Program Level: <input type="checkbox"/> EMT-I <input type="checkbox"/> AEMT <input type="checkbox"/> EMT-P <input type="checkbox"/> EMR <input type="checkbox"/> Public Safety <input type="checkbox"/> First Aid <input checked="" type="checkbox"/> Continuing Education
Program Cost: Basic _____ Refresher _____	
Training Institution: <u>County of Santa Clara, Emergency Medical Services Agency</u>	Phone Number: <u>408-794-0600</u>
Address: <u>700 Empey Way</u> <u>San Jose, CA 95128</u>	Contact Name: <u>Daniel Peck</u>

Training Program Statistics for Reporting Year

Initial = In. Refresher = Ref.	EMT-I		AEMT		EMT-P		EMR		Public Safety		First Aid		Continuing Educ.	
	In.	Ref.	In.	Ref.	In.	Ref.	In.	Ref.	In.	Ref.	In.	Ref.		
Number of courses offered	0	0	0	0	0	0	0	0	0	0	0	0	N/A	6
Number of students completing training	0	0	0	0	0	0	0	0	0	0	0	0	N/A	172

Available Training

CY 2020

Continuing Education Number: <u>43-2001</u>	Expiration Date of Training Program: <u>12/31/2020</u>
Student Eligibility: <u>Restricted</u> <small>(Open to general public or restricted)</small>	Program Level: <input type="checkbox"/> EMT-I <input type="checkbox"/> AEMT <input type="checkbox"/> EMT-P <input type="checkbox"/> EMR <input type="checkbox"/> Public Safety <input type="checkbox"/> First Aid <input checked="" type="checkbox"/> Continuing Education
Program Cost: Basic _____ Refresher _____	
Training Institution: <u>City of San Jose, Fire Department</u>	Phone Number: <u>408-794-7000</u>
Address: <u>255 North Montgomery Street</u> <u>San Jose, CA 95110</u>	Contact Name: <u>Brett Maas</u>

Training Program Statistics for Reporting Year

Initial = In. Refresher = Ref.	EMT-I		AEMT		EMT-P		EMR		Public Safety		First Aid		Continuing Educ.	
	In.	Ref.	In.	Ref.	In.	Ref.	In.	Ref.	In.	Ref.	In.	Ref.		
Number of courses offered	0	0	0	0	0	0	0	0	0	0	0	0	N/A	3
Number of students completing training	0	0	0	0	0	0	0	0	0	0	0	0	N/A	1,437

Available Training

CY 2020

Continuing Education Number: <u>43-2002</u>	Expiration Date of Training Program: <u>09/30/2023</u>
Student Eligibility: <u>Restricted</u> (Open to general public or restricted)	Program Level: <input type="checkbox"/> EMT-I <input type="checkbox"/> AEMT <input type="checkbox"/> EMT-P <input type="checkbox"/> EMR <input type="checkbox"/> Public Safety <input type="checkbox"/> First Aid <input checked="" type="checkbox"/> Continuing Education
Program Cost: Basic _____ Refresher _____	
Training Institution: <u>City of Palo Alto, Fire Department</u>	Phone Number: <u>650.329.2220</u>
Address: <u>250 Hamilton Avenue</u> <u>Palo Alto, CA 94301</u>	Contact Name: <u>Kimberly Roderick</u>

Training Program Statistics for Reporting Year

Initial = In. Refresher = Ref.	EMT-I		AEMT		EMT-P		EMR		Public Safety		First Aid		Continuing Educ.	
	In.	Ref.	In.	Ref.	In.	Ref.	In.	Ref.	In.	Ref.	In.	Ref.		
Number of courses offered	0	0	0	0	0	0	0	0	0	0	0	0	N/A	26
Number of students completing training	0	0	0	0	0	0	0	0	0	0	0	0	N/A	92

Available Training

CY 2020

Continuing Education Number: <u>43-2003</u>	Expiration Date of Training Program: <u>03/31/2024</u>
Student Eligibility: <u>Restricted</u> (Open to general public or restricted)	Program Level: <input type="checkbox"/> EMT-I <input type="checkbox"/> AEMT <input type="checkbox"/> EMT-P <input type="checkbox"/> EMR <input type="checkbox"/> Public Safety <input type="checkbox"/> First Aid <input checked="" type="checkbox"/> Continuing Education
Program Cost: Basic _____ Refresher _____	
Training Institution: <u>City of Santa Clara, Fire Department</u>	Phone Number: <u>408.615.4900</u>
Address: <u>777 Benton Street</u> <u>Santa Clara, CA 95050</u>	Contact Name: <u>Zach McGhie</u>

Training Program Statistics for Reporting Year

Initial = In. Refresher = Ref.	EMT-I		AEMT		EMT-P		EMR		Public Safety		First Aid		Continuing Educ.	
	In.	Ref.	In.	Ref.	In.	Ref.	In.	Ref.	In.	Ref.	In.	Ref.		
Number of courses offered	0	0	0	0	0	0	0	0	0	0	0	0	N/A	19
Number of students completing training	0	0	0	0	0	0	0	0	0	0	0	0	N/A	130

Available Training

CY 2020

Continuing Education Number: <u>43-2005</u>	Expiration Date of Training Program: <u>11/30/2021</u>
Student Eligibility: <u>Restricted</u> (Open to general public or restricted)	Program Level: <input checked="" type="checkbox"/> EMT-I <input type="checkbox"/> AEMT <input type="checkbox"/> EMT-P <input type="checkbox"/> EMR <input type="checkbox"/> Public Safety <input type="checkbox"/> First Aid <input checked="" type="checkbox"/> Continuing Education
Program Cost: Basic <u>Not provided</u> Refresher <u>Not provided</u>	
Training Institution: <u>City of Sunnyvale, Department of Public Safety</u>	Phone Number: <u>408.730.7519</u>
Address: <u>700 All America Way</u> <u>Sunnyvale, CA 94088</u>	Contact Name: <u>Charlene Donahue</u>

Training Program Statistics for Reporting Year

Initial = In. Refresher = Ref.	EMT-I		AEMT		EMT-P		EMR		Public Safety		First Aid		Continuing Educ.	
	In.	Ref.	In.	Ref.	In.	Ref.	In.	Ref.	In.	Ref.	In.	Ref.		
Number of courses offered	Not provided by the agency	Not provided by the agency	0	0	0	0	0	0	0	0	0	0	N/A	Not provided by the agency
Number of students completing training	Not provided by the agency	Not provided by the agency	0	0	0	0	0	0	0	0	0	0	N/A	Not provided by the agency

Available Training

CY 2020

Continuing Education Number: <u>43-2006</u>	Expiration Date of Training Program: <u>11/30/2022</u>
Student Eligibility: <u>Restricted</u> (Open to general public or restricted)	Program Level: <input type="checkbox"/> EMT-I <input type="checkbox"/> AEMT <input type="checkbox"/> EMT-P <input type="checkbox"/> EMR <input type="checkbox"/> Public Safety <input type="checkbox"/> First Aid <input checked="" type="checkbox"/> Continuing Education
Program Cost: Basic _____ Refresher _____	
Training Institution: <u>County of Santa Clara, Fire Department</u>	Phone Number: <u>408.378.4010</u>
Address: <u>14700 Winchester Blvd.</u> <u>Los Gatos, CA 95032</u>	Contact Name: <u>Karla Costa-Cunningham</u>

Training Program Statistics for Reporting Year

Initial = In. Refresher = Ref.	EMT-I		AEMT		EMT-P		EMR		Public Safety		First Aid		Continuing Educ.	
	In.	Ref.	In.	Ref.	In.	Ref.	In.	Ref.	In.	Ref.	In.	Ref.		
Number of courses offered	0	0	0	0	0	0	0	0	0	0	0	0	N/A	Not provided by the agency
Number of students completing training	0	0	0	0	0	0	0	0	0	0	0	0	N/A	Not provided by the agency

Available Training

CY 2020

Continuing Education Number: <u>43-2010</u>	Expiration Date of Training Program: <u>10/31/2023</u>
Student Eligibility: <u>Restricted</u> (Open to general public or restricted)	Program Level: <input type="checkbox"/> EMT-I <input type="checkbox"/> AEMT <input type="checkbox"/> EMT-P <input type="checkbox"/> EMR <input type="checkbox"/> Public Safety <input type="checkbox"/> First Aid <input checked="" type="checkbox"/> Continuing Education
Program Cost: Basic _____ Refresher _____	
Training Institution: <u>City of Milpitas, Fire Department</u>	Phone Number: <u>408.568.2800</u>
Address: <u>777 Main Street</u> <u>Milpitas, CA 95035</u>	Contact Name: <u>Geoffrey Maloon</u>

Training Program Statistics for Reporting Year

Initial = In. Refresher = Ref.	EMT-I		AEMT		EMT-P		EMR		Public Safety		First Aid		Continuing Educ.	
	In.	Ref.	In.	Ref.	In.	Ref.	In.	Ref.	In.	Ref.	In.	Ref.		
Number of courses offered	0	0	0	0	0	0	0	0	0	0	0	0	N/A	5
Number of students completing training	0	0	0	0	0	0	0	0	0	0	0	0	N/A	57

Available Training

CY 2020

Continuing Education Number: <u>43-2012</u>	Expiration Date of Training Program: <u>11/30/2021</u>
Student Eligibility: <u>Restricted</u> (Open to general public or restricted)	Program Level: <input type="checkbox"/> EMT-I <input type="checkbox"/> AEMT <input type="checkbox"/> EMT-P <input type="checkbox"/> EMR <input type="checkbox"/> Public Safety <input type="checkbox"/> First Aid <input checked="" type="checkbox"/> Continuing Education
Program Cost: Basic _____ Refresher _____	
Training Institution: <u>NASA-Ames Fire Department [provided by Fiore Industries, Inc.]</u>	Phone Number: <u>650.604.5416</u>
Address: <u>580 Zook Road</u> <u>Moffett Field, CA 94035</u>	Contact Name: <u>John Byrne</u>

Training Program Statistics for Reporting Year

Initial = In. Refresher = Ref.	EMT-I		AEMT		EMT-P		EMR		Public Safety		First Aid		Continuing Educ.	
	In.	Ref.	In.	Ref.	In.	Ref.	In.	Ref.	In.	Ref.	In.	Ref.		
Number of courses offered	0	0	0	0	0	0	0	0	0	0	0	0	N/A	Not provided by the agency
Number of students completing training	0	0	0	0	0	0	0	0	0	0	0	0	N/A	Not provided by the agency

Available Training

CY 2020

Continuing Education Number: <u>43-2013</u>	Expiration Date of Training Program: <u>08/31/2024</u>
Student Eligibility: <u>Restricted</u> (Open to general public or restricted)	Program Level: <input type="checkbox"/> EMT-I <input type="checkbox"/> AEMT <input type="checkbox"/> EMT-P <input type="checkbox"/> EMR <input type="checkbox"/> Public Safety <input type="checkbox"/> First Aid <input checked="" type="checkbox"/> Continuing Education
Program Cost: Basic _____ Refresher _____	
Training Institution: <u>City of Mountain View, Fire Department</u>	Phone Number: <u>650.903.6812</u>
Address: <u>1000 Villa Street</u> <u>Mountain View, CA 94040</u>	Contact Name: <u>Jeff Cole</u>

Training Program Statistics for Reporting Year

Initial = In. Refresher = Ref.	EMT-I		AEMT		EMT-P		EMR		Public Safety		First Aid		Continuing Educ.	
	In.	Ref.	In.	Ref.	In.	Ref.	In.	Ref.	In.	Ref.	In.	Ref.		
Number of courses offered	0	0	0	0	0	0	0	0	0	0	0	0	N/A	Not provided by the agency
Number of students completing training	0	0	0	0	0	0	0	0	0	0	0	0	N/A	Not provided by the agency

Available Training

CY 2020

Continuing Education Number: <u>43-2015</u>		Expiration Date of Training Program: <u>03/31/2022</u>	
Student Eligibility: <u>Open to general public</u> (Open to general public or restricted)		Program Level: <input checked="" type="checkbox"/> EMT-I <input type="checkbox"/> AEMT <input type="checkbox"/> EMT-P <input type="checkbox"/> EMR <input type="checkbox"/> Public Safety <input type="checkbox"/> First Aid <input checked="" type="checkbox"/> Continuing Education	
Program Cost: Basic <u>\$2,500.00</u> Refresher <u>\$300.00</u>			
Training Institution: <u>Silicon Valley Ambulance EMT Academy</u>		Phone Number: <u>408.778.4911</u>	
Address: <u>181 Martinvale Lane</u> <u>San Jose, CA 95119</u>		Contact Name: <u>Randy Hooks</u>	

Training Program Statistics for Reporting Year

Initial = In. Refresher = Ref.	EMT-I		AEMT		EMT-P		EMR		Public Safety		First Aid		Continuing Educ.	
	In.	Ref.	In.	Ref.	In.	Ref.	In.	Ref.	In.	Ref.	In.	Ref.		
Number of courses offered	4	0	0	0	0	0	0	0	0	0	0	0	N/A	19
Number of students completing training	47	0	0	0	0	0	0	0	0	0	0	0	N/A	151

Available Training

CY 2020

Continuing Education Number: <u>43-2016</u>	Expiration Date of Training Program: <u>11/30/2023</u>
Student Eligibility: <u>Restricted</u> (Open to general public or restricted)	Program Level: <input type="checkbox"/> EMT-I <input type="checkbox"/> AEMT <input type="checkbox"/> EMT-P <input type="checkbox"/> EMR <input type="checkbox"/> Public Safety <input type="checkbox"/> First Aid <input checked="" type="checkbox"/> Continuing Education
Program Cost: Basic _____ Refresher _____	
Rural/Metro of California, Inc; subsidiary of AMR/Global Medical Response	
Training Institution: _____	Phone Number: <u>408.645.7345</u>
Address: <u>1345 Vander Way</u> <u>San Jose, CA 95112</u>	Contact Name: <u>Adrian Ayllon</u>

Training Program Statistics for Reporting Year

Initial = In. Refresher = Ref.	EMT-I		AEMT		EMT-P		EMR		Public Safety		First Aid		Continuing Educ.	
	In.	Ref.	In.	Ref.	In.	Ref.	In.	Ref.	In.	Ref.	In.	Ref.		
Number of courses offered	0	0	0	0	0	0	0	0	0	0	0	0	N/A	17
Number of students completing training	0	0	0	0	0	0	0	0	0	0	0	0	N/A	1,099

Available Training

CY 2020

Continuing Education Number: <u>43-3000</u>	Expiration Date of Training Program: <u>07/31/2023</u>
Student Eligibility: <u>Restricted</u> (Open to general public or restricted)	Program Level: <input type="checkbox"/> EMT-I <input type="checkbox"/> AEMT <input type="checkbox"/> EMT-P <input type="checkbox"/> EMR <input type="checkbox"/> Public Safety <input type="checkbox"/> First Aid <input checked="" type="checkbox"/> Continuing Education
Program Cost: Basic _____ Refresher _____	
Training Institution: <u>City of Gilroy, Fire Department</u>	Phone Number: <u>408.848.0385</u>
Address: <u>7070 Chestnut Street</u> <u>Gilroy, CA 95020</u>	Contact Name: <u>Shaun Peyghambary</u>

Training Program Statistics for Reporting Year

Initial = In. Refresher = Ref.	EMT-I		AEMT		EMT-P		EMR		Public Safety		First Aid		Continuing Educ.	
	In.	Ref.	In.	Ref.	In.	Ref.	In.	Ref.	In.	Ref.	In.	Ref.		
Number of courses offered	0	0	0	0	0	0	0	0	0	0	0	0	N/A	Not provided by the agency
Number of students completing training	0	0	0	0	0	0	0	0	0	0	0	0	N/A	Not provided by the agency

Available Training

CY 2020

Continuing Education Number: <u>43-3001 / 43-3006</u>		Expiration Date of Training Program: <u>01/31/2024</u>	
Student Eligibility: <u>Open to general public</u> (Open to general public or restricted)		Program Level: <input checked="" type="checkbox"/> EMT-I <input type="checkbox"/> AEMT <input checked="" type="checkbox"/> EMT-P <input type="checkbox"/> EMR <input type="checkbox"/> Public Safety <input type="checkbox"/> First Aid <input checked="" type="checkbox"/> Continuing Education	
		Program Cost: Basic <u>\$250.00-\$750.00</u> Refresher <u>\$250.00</u> Paramedic Program Cost: <u>\$7,000.00</u>	
Training Institution: <u>Foothill Community College</u>		Phone Number: <u>408.745.8000 / 650.949.7777</u>	
Address: <u>1070 Innovation Way</u> <u>Sunnyvale, CA 94089</u>		Contact Name: <u>Tracy Villanueva</u>	

Training Program Statistics for Reporting Year

Initial = In. Refresher = Ref.	EMT-I		AEMT		EMT-P		EMR		Public Safety		First Aid		Continuing Educ.	
	In.	Ref.	In.	Ref.	In.	Ref.	In.	Ref.	In.	Ref.	In.	Ref.		
Number of courses offered	1	0	0	0	2	0	0	0	0	0	0	0	N/A	8
Number of students completing training	40	0	0	0	56	0	0	0	0	0	0	0	N/A	38

Available Training

CY 2020

Continuing Education Number: <u>43-3004</u>	Expiration Date of Training Program: <u>01/31/2021</u>
Student Eligibility: <u>Open to general public</u> (Open to general public or restricted)	Program Level: <input checked="" type="checkbox"/> EMT-I <input type="checkbox"/> AEMT <input type="checkbox"/> EMT-P <input type="checkbox"/> EMR <input type="checkbox"/> Public Safety <input type="checkbox"/> First Aid <input checked="" type="checkbox"/> Continuing Education
Program Cost: Basic <u>\$276.00</u> Refresher <u>\$23.00</u>	
Training Institution: <u>San Jose City College</u>	Phone Number: <u>408.298-2181 ext. 3134</u>
Address: <u>2100 Moorpark Avenue</u> <u>San Jose, CA 95128</u>	Contact Name: <u>Scott Miller</u>

Training Program Statistics for Reporting Year

Initial = In. Refresher = Ref.	EMT-I		AEMT		EMT-P		EMR		Public Safety		First Aid		Continuing Educ.	
	In.	Ref.	In.	Ref.	In.	Ref.	In.	Ref.	In.	Ref.	In.	Ref.		
Number of courses offered	Not provided by the agency	Not provided by the agency	0	0	0	0	0	0	0	0	0	0	N/A	0
Number of students completing training	Not provided by the agency	Not provided by the agency	0	0	0	0	0	0	0	0	0	0	N/A	0

Available Training

CY 2020

Continuing Education Number: <u>43-3005</u>		Expiration Date of Training Program: <u>07/31/2021</u>	
Student Eligibility: <u>Open to general public</u> (Open to general public or restricted)		Program Level: <input checked="" type="checkbox"/> EMT-I <input type="checkbox"/> AEMT <input type="checkbox"/> EMT-P <input type="checkbox"/> EMR <input type="checkbox"/> Public Safety <input type="checkbox"/> First Aid <input checked="" type="checkbox"/> Continuing Education	
Program Cost: Basic <u>\$400.00</u> Refresher <u>\$150.00</u>			
Training Institution: <u>Mission College</u>		Phone Number: <u>408.855.5387</u>	
Address: <u>300 Mission College Blvd.</u> <u>Santa Clara, CA 94054</u>		Contact Name: <u>David Rose</u>	

Training Program Statistics for Reporting Year

Initial = In. Refresher = Ref.	EMT-I		AEMT		EMT-P		EMR		Public Safety		First Aid		Continuing Educ.	
	In.	Ref.	In.	Ref.	In.	Ref.	In.	Ref.	In.	Ref.	In.	Ref.		
Number of courses offered	6	0	0	0	0	0	0	0	0	0	0	0	N/A	0
Number of students completing training	145	0	0	0	0	0	0	0	0	0	0	0	N/A	0

Available Training

Continuing Education Number: <u>43-3007</u>	Expiration Date of Training Program: <u>02/28/2022</u>
Student Eligibility: <u>Restricted</u> (Open to general public or restricted)	Program Level: <input checked="" type="checkbox"/> EMT-I <input type="checkbox"/> AEMT <input type="checkbox"/> EMT-P <input checked="" type="checkbox"/> EMR <input type="checkbox"/> Public Safety <input type="checkbox"/> First Aid <input checked="" type="checkbox"/> Continuing Education
Program Cost: Basic <u>Not provided</u> Refresher <u>Not provided</u>	
Training Institution: <u>Stanford University EMT Program</u>	Phone Number: <u>650.723.6576 / 415.323.0367</u>
Address: <u>900 Welch Road, Suite 350</u> <u>Stanford, CA 94305-2200</u>	Contact Name: <u>Eric Marxmiller</u>

Training Program Statistics for Reporting Year

Initial = In. Refresher = Ref.	EMT-I		AEMT		EMT-P		EMR		Public Safety		First Aid		Continuing Educ.		
	In.	Ref.	In.	Ref.	In.	Ref.	In.	Ref.	In.	Ref.	In.	Ref.			
Number of courses offered	Not provided by the agency	Not provided by the agency	0	0	0	0	Not provided by the agency	0	0	0	0	0	0	N/A	0
Number of students completing training	Not provided by the agency	Not provided by the agency	0	0	0	0	Not provided by the agency	0	0	0	0	0	0	N/A	0

Available Training

CY 2020

Continuing Education Number: <u>43-3008</u>		Expiration Date of Training Program: <u>03/31/2023</u>	
Student Eligibility: <u>Open to general public</u> (Open to general public or restricted)		Program Level: <input checked="" type="checkbox"/> EMT-I <input type="checkbox"/> AEMT <input type="checkbox"/> EMT-P <input type="checkbox"/> EMR <input type="checkbox"/> Public Safety <input type="checkbox"/> First Aid <input checked="" type="checkbox"/> Continuing Education	
Program Cost: Basic <u>\$1,325.00</u> Refresher <u>\$140.00</u>			
Training Institution: <u>South Bay Regional Public Safety Training Consortium</u>		Phone Number: <u>408.229.4299</u>	
Address: <u>500 Bailey Avenue</u> <u>San Jose, CA 95141</u>		Contact Name: <u>Glen Thompson</u>	

Training Program Statistics for Reporting Year

Initial = In. Refresher = Ref.	EMT-I		AEMT		EMT-P		EMR		Public Safety		First Aid		Continuing Educ.	
	In.	Ref.	In.	Ref.	In.	Ref.	In.	Ref.	In.	Ref.	In.	Ref.		
Number of courses offered	1	0	0	0	0	0	0	0	0	0	0	0	N/A	0
Number of students completing training	16	0	0	0	0	0	0	0	0	0	0	0	N/A	0

Available Training

CY 2020

Continuing Education Number: <u>43-3009</u>	Expiration Date of Training Program: <u>07/31/2024</u>
Student Eligibility: <u>Open to general public</u> (Open to general public or restricted)	Program Level: <input type="checkbox"/> EMT-I <input type="checkbox"/> AEMT <input type="checkbox"/> EMT-P <input type="checkbox"/> EMR <input type="checkbox"/> Public Safety <input type="checkbox"/> First Aid <input checked="" type="checkbox"/> Continuing Education
Program Cost: Basic _____ Refresher _____	
Training Institution: <u>South County EMS Training Center</u>	Phone Number: <u>650.740.8422</u>
Address: <u>1057 Cochrane Road, Suite 160-11</u> <u>Morgan Hill, CA 95037</u>	Contact Name: <u>Joseph English</u>

Training Program Statistics for Reporting Year

Initial = In. Refresher = Ref.	EMT-I		AEMT		EMT-P		EMR		Public Safety		First Aid		Continuing Educ.	
	In.	Ref.	In.	Ref.	In.	Ref.	In.	Ref.	In.	Ref.	In.	Ref.		
Number of courses offered	0	0	0	0	0	0	0	0	0	0	0	0	N/A	Not provided by the agency
Number of students completing training	0	0	0	0	0	0	0	0	0	0	0	0	N/A	Not provided by the agency

Available Training

CY 2020

Continuing Education Number: <u>43-5002</u>		Expiration Date of Training Program: <u>10/31/2020</u>	
Student Eligibility: <u>Open to general public</u> (Open to general public or restricted)		Program Level: <input checked="" type="checkbox"/> EMT-I <input type="checkbox"/> AEMT <input type="checkbox"/> EMT-P <input type="checkbox"/> EMR <input type="checkbox"/> Public Safety <input type="checkbox"/> First Aid <input checked="" type="checkbox"/> Continuing Education	
Program Cost: Basic <u>\$1,467.00</u> Refresher <u>\$200.00</u>			
Training Institution: <u>National University</u>		Phone Number: <u>408.236.1170</u> <u>800.432.3483</u>	
Address: <u>3031 Tisch Way</u> <u>San Jose, CA 95128</u>		Contact Name: <u>Manuel Medina</u>	

Training Program Statistics for Reporting Year

Initial = In. Refresher = Ref.	EMT-I		AEMT		EMT-P		EMR		Public Safety		First Aid		Continuing Educ.	
	In.	Ref.	In.	Ref.	In.	Ref.	In.	Ref.	In.	Ref.	In.	Ref.		
Number of courses offered	0	0	0	0	0	0	0	0	0	0	0	0	N/A	0
Number of students completing training	0	0	0	0	0	0	0	0	0	0	0	0	N/A	0

[Closed operations in 2020]

Available Training

CY 2020

Continuing Education Number: <u>43-7001</u>	Expiration Date of Training Program: <u>08/31/2021</u>
Student Eligibility: <u>Open to general public</u> (Open to general public or restricted)	Program Level: <input type="checkbox"/> EMT-I <input type="checkbox"/> AEMT <input type="checkbox"/> EMT-P <input type="checkbox"/> EMR <input type="checkbox"/> Public Safety <input type="checkbox"/> First Aid <input checked="" type="checkbox"/> Continuing Education
Program Cost: Basic _____ Refresher _____	
Training Institution: <u>HeartShare Training Services, Inc.</u>	Phone Number: <u>408.246.0311</u>
Address: <u>1371 South Bascom Avenue</u> <u>San Jose, CA 95125</u>	Contact Name: <u>Vernon Adkins</u>

Training Program Statistics for Reporting Year

Initial = In. Refresher = Ref.	EMT-I		AEMT		EMT-P		EMR		Public Safety		First Aid		Continuing Educ.	
	In.	Ref.	In.	Ref.	In.	Ref.	In.	Ref.	In.	Ref.	In.	Ref.		
Number of courses offered	0	0	0	0	0	0	0	0	0	0	0	0	N/A	2,003
Number of students completing training	0	0	0	0	0	0	0	0	0	0	0	0	N/A	11,918

TABLE 3:
COMMUNICATIONS

County: Santa Clara

Reporting Year: CY2020

EMS Agency Communications Structure

Number of primary Public Service Answering Points (PSAP): 13

Number of secondary PSAPs: 3

Number of dispatch centers directly dispatching ambulances: 15

Number of EMS dispatch agencies utilizing EMD guidelines: 6

Number of designated dispatch centers for EMS aircraft: 3

Who is your primary dispatch agency for day-to day emergencies?

County of Santa Clara, Communications Department

Do you have an operational area disaster communication system? Yes No

a) Identify the radio primary frequency: RX 856.4375 / TX 811.4375

b) Identify other methods: RX 852.5125 / TX 807.5125

c) Can all medical response units communicate on the same disaster communication system? Yes No

d) Do you participate in the Operational Area Satellite Information System? Yes No

e) Do you have a plan to utilize the Radio Amateur Civil Emergency Services as a back-up communication system? Yes No

1) Within the operational area? Yes No

2) Between operational area and the region and/or state? Yes No

Dispatch Resource

County: Santa Clara

Reporting Year: CY 2020

Dispatch Agency: AMR - Sutter IFT

Name of Primary Contact: _____

Address: 13992 Catalina Street
San Leandro, CA 94577

Telephone Number: 855.788.8370

Written Contract:

- Yes
- No

Medical Director:

- Yes
- No

Availability:

- Day-to-Day
- Disaster

Number of Personnel Providing Services:

EMD Training _____ EMT-D _____ ALS _____
BLS _____ LALS _____ Other _____

Total Number of Dispatchers: 16

Ownership:

- Public
- Private

If Public:

- Fire
- Law
- Other _____

If Public:

- City
- County
- State
- Fire District
- Federal

Designated to Coordinate the Use of Air Ambulance or Air Rescue Aircraft: Yes No

Dispatch Resource

County: Santa Clara

Reporting Year: CY 2020

Dispatch Agency: CALSTAR

Name of Primary Contact: Jeff Horner

Address: 4933 Bailey Loop
McClellan, CA 95652

Telephone Number: 916.921.4000

Written Contract:

- Yes
- No

Medical Director:

- Yes
- No

Availability:

- Day-to-Day
- Disaster

Number of Personnel Providing Services:

EMD Training _____ EMT-D _____ ALS _____
BLS _____ LALS _____ Other 5

Total Number of Dispatchers: 5

Ownership:

- Public
- Private

If Public:

- Fire
- Law
- Other _____

If Public:

- City
- County
- State
- Fire District
- Federal

Designated to Coordinate the Use of Air Ambulance or Air Rescue Aircraft: Yes No

Dispatch Resource

County: Santa Clara

Reporting Year: CY 2020

Dispatch Agency: City of Campbell, Police Department

Name of Primary Contact: _____

Address: 70 North First Street
Campbell, CA 95008

Telephone Number: 408.866.2121

Written Contract:

- Yes
- No

Medical Director:

- Yes
- No

Availability:

- Day-to-Day
- Disaster

Number of Personnel Providing Services:

EMD Training _____ EMT-D _____ ALS _____
BLS _____ LALS _____ Other 8

Total Number of Dispatchers: 8

Ownership:

- Public
- Private

If Public:

- Fire
- Law
- Other _____

If Public:

- City
- County
- State
- Fire District
- Federal

Designated to Coordinate the Use of Air Ambulance or Air Rescue Aircraft: Yes No

Dispatch Resource

County: Santa Clara

Reporting Year: CY 2020

Dispatch Agency: County of Santa Clara, Communications Department

Name of Primary Contact: Heather Plamondon

Address: 2700 Carol Drive
San Jose, CA 95125

Telephone Number: 408.977.3200

Written Contract:

- Yes
- No

Medical Director:

- Yes
- No

Availability:

- Day-to-Day
- Disaster

Number of Personnel Providing Services:

EMD Training 70 EMT-D _____ ALS _____
BLS _____ LALS _____ Other _____

Total Number of Dispatchers: 91

Ownership:

- Public
- Private

If Public:

- Fire
- Law
- Other EMS

If Public:

- City
- County
- State
- Fire District
- Federal

Designated to Coordinate the Use of Air Ambulance or Air Rescue Aircraft: Yes No

Dispatch Resource

County: Santa Clara

Reporting Year: CY 2020

Dispatch Agency: Falcon Critical Care Transport

Name of Primary Contact: _____

Address: 3508 San Pablo Dam Road
El Sobrante, CA 94803

Telephone Number: 510.223.1171

Written Contract:

- Yes
- No

Medical Director:

- Yes
- No

Availability:

- Day-to-Day
- Disaster

Number of Personnel Providing Services:

EMD Training _____ EMT-D _____ ALS _____
BLS _____ LALS _____ Other _____

Total Number of Dispatchers: 8

Ownership:

- Public
- Private

If Public:

- Fire
- Law
- Other _____

If Public:

- City
- County
- State
- Fire District
- Federal

Designated to Coordinate the Use of Air Ambulance or Air Rescue Aircraft: Yes No

Dispatch Resource

County: Santa Clara

Reporting Year: CY 2020

Dispatch Agency: City of Gilroy, Police Department

Name of Primary Contact: _____

Address: 7370 Rosanna Street
Gilroy, CA 95020

Telephone Number: 408.848.0329

Written Contract:

- Yes
- No

Medical Director:

- Yes
- No

Availability:

- Day-to-Day
- Disaster

Number of Personnel Providing Services:

EMD Training _____ EMT-D _____ ALS _____
BLS _____ LALS _____ Other 11

Total Number of Dispatchers: 11

Ownership:

- Public
- Private

If Public:

- Fire
- Law
- Other _____

If Public:

- City
- County
- State
- Fire District
- Federal

Designated to Coordinate the Use of Air Ambulance or Air Rescue Aircraft: Yes No

Dispatch Resource

County: Santa Clara

Reporting Year: CY 2020

Dispatch Agency: Stanford Life Flight

Name of Primary Contact: _____

Address: 300 Pasteur Drive
Palo Alto, CA 94305

Telephone Number: 650.497.8674

Written Contract:

- Yes
- No

Medical Director:

- Yes
- No

Availability:

- Day-to-Day
- Disaster

Number of Personnel Providing Services:

EMD Training _____ EMT-D _____ ALS _____
BLS _____ LALS _____ Other _____

Total Number of Dispatchers: 4

Ownership:

- Public
- Private

If Public:

- Fire
- Law
- Other _____

If Public:

- City
- County
- State
- Fire District
- Federal

Designated to Coordinate the Use of Air Ambulance or Air Rescue Aircraft: Yes No

Dispatch Resource

County: Santa Clara

Reporting Year: CY 2020

Dispatch Agency: City of Los Altos, Police Department

Name of Primary Contact: _____

Address: 1 North San Antonio Road
Los Altos, CA 94022

Telephone Number: 408.947.2770

Written Contract:

- Yes
- No

Medical Director:

- Yes
- No

Availability:

- Day-to-Day
- Disaster

Number of Personnel Providing Services:

EMD Training _____ EMT-D _____ ALS _____
BLS _____ LALS _____ Other 7

Total Number of Dispatchers: 7

Ownership:

- Public
- Private

If Public:

- Fire
- Law
- Other _____

If Public:

- City
- County
- State
- Fire District
- Federal

Designated to Coordinate the Use of Air Ambulance or Air Rescue Aircraft: Yes No

Dispatch Resource

County: Santa Clara

Reporting Year: CY 2019

Dispatch Agency: Town of Los Gatos/Monte Sereno, Police Department

Name of Primary Contact: _____

Address: 110 East Main Street
Los Gatos, CA 95030

Telephone Number: 408.354.8600

Written Contract:

- Yes
- No

Medical Director:

- Yes
- No

Availability:

- Day-to-Day
- Disaster

Number of Personnel Providing Services:

EMD Training _____ EMT-D _____ ALS _____
BLS _____ LALS _____ Other 8

Total Number of Dispatchers: 8

Ownership:

- Public
- Private

If Public:

- Fire
- Law
- Other _____

If Public:

- City
- County
- State
- Fire District
- Federal

Designated to Coordinate the Use of Air Ambulance or Air Rescue Aircraft: Yes No

Dispatch Resource

County: Santa Clara

Reporting Year: CY 2020

Dispatch Agency: Mid-Peninsula Open Space District

Name of Primary Contact: _____

Address: 330 Distel Circle
Los Altos, CA 94022

Telephone Number: 650.691.1200

Written Contract:

- Yes
- No

Medical Director:

- Yes
- No

Availability:

- Day-to-Day
- Disaster

Number of Personnel Providing Services:

EMD Training _____ EMT-D _____ ALS _____
BLS _____ LALS _____ Other 12

Total Number of Dispatchers: 12

Ownership:

- Public
- Private

If Public:

- Fire
- Law
- Other Special District

If Public:

- City
- County
- State
- Fire District
- Federal

Designated to Coordinate the Use of Air Ambulance or Air Rescue Aircraft: Yes No

Dispatch Resource

County: Santa Clara

Reporting Year: CY 2020

Dispatch Agency: City of Milpitas, Police Department

Name of Primary Contact: _____

Address: 777 Main Street
Milpitas, CA 95035

Telephone Number: 408.586.2405

Written Contract:

- Yes
- No

Medical Director:

- Yes
- No

Availability:

- Day-to-Day
- Disaster

Number of Personnel Providing Services:

EMD Training _____ EMT-D _____ ALS _____
BLS _____ LALS _____ Other _____

Total Number of Dispatchers: 16

Ownership:

- Public
- Private

If Public:

- Fire
- Law
- Other EMS

If Public:

- City
- County
- State
- Fire District
- Federal

Designated to Coordinate the Use of Air Ambulance or Air Rescue Aircraft: Yes No

Dispatch Resource

County: Santa Clara **Reporting Year:** CY 2020

Dispatch Agency: NASA-Ames Fire Department [provided by Fiore Industries, Inc.] **Name of Primary Contact:** _____

Address: Building 15; Mail Stop 15-1 **Telephone Number:** 650.604.5416
Moffett Field, CA 94035

Written Contract: Yes No

Medical Director: Yes No

Availability: Day-to-Day Disaster

Number of Personnel Providing Services:

EMD Training _____ EMT-D _____ ALS _____

BLS _____ LALS _____ Other _____

Total Number of Dispatchers: 10

Ownership: Public Private

If Public: Fire Law Other _____

If Public: City County State Fire District Federal

Designated to Coordinate the Use of Air Ambulance or Air Rescue Aircraft: Yes No

Dispatch Resource

County: Santa Clara

Reporting Year: CY 2020

Dispatch Agency: City of Morgan Hill, Police Department

Name of Primary Contact: _____

Address: 17605 Peak Avenue
Morgan Hill, CA 95035

Telephone Number: 408.776.7304

Written Contract:

- Yes
- No

Medical Director:

- Yes
- No

Availability:

- Day-to-Day
- Disaster

Number of Personnel Providing Services:

EMD Training _____ EMT-D _____ ALS _____
BLS _____ LALS _____ Other 8

Total Number of Dispatchers: 8

Ownership:

- Public
- Private

If Public:

- Fire
- Law
- Other _____

If Public:

- City
- County
- State
- Fire District
- Federal

Designated to Coordinate the Use of Air Ambulance or Air Rescue Aircraft: Yes No

Dispatch Resource

County: Santa Clara

Reporting Year: CY 2020

Dispatch Agency: City of Mountain View, Police Department

Name of Primary Contact: _____

Address: 1000 Villa Street
Mountain View, CA 94040

Telephone Number: 650.903.6804

Written Contract:

- Yes
- No

Medical Director:

- Yes
- No

Availability:

- Day-to-Day
- Disaster

Number of Personnel Providing Services:

EMD Training 8 EMT-D _____ ALS _____
BLS _____ LALS _____ Other _____

Total Number of Dispatchers: 12

Ownership:

- Public
- Private

If Public:

- Fire
- Law
- Other EMS

If Public:

- City
- County
- State
- Fire District
- Federal

Designated to Coordinate the Use of Air Ambulance or Air Rescue Aircraft: Yes No

Dispatch Resource

County: Santa Clara **Reporting Year:** CY 2020

Dispatch Agency: NORCAL Ambulance **Name of Primary Contact:** _____

Address: 6761 Sierra Court **Telephone Number:** 866.755.3400
Dublin, CA 94568 925.452.8300

Written Contract: Yes No
Medical Director: Yes No
Availability: Day-to-Day Disaster
Number of Personnel Providing Services:
EMD Training _____ EMT-D _____ ALS _____
BLS _____ LALS _____ Other _____
Total Number of Dispatchers: 15

Ownership: Public Private
If Public: Fire Law Other _____
If Public: City County State Fire District Federal

Designated to Coordinate the Use of Air Ambulance or Air Rescue Aircraft: Yes No

Dispatch Resource

County: Santa Clara

Reporting Year: CY 2020

Dispatch Agency: City of Palo Alto, Police Department

Name of Primary Contact: _____

Address: 275 Forest Avenue
Palo Alto, CA 94301

Telephone Number: 408.903.6804

Written Contract:

- Yes
- No

Medical Director:

- Yes
- No

Availability:

- Day-to-Day
- Disaster

Number of Personnel Providing Services:

EMD Training 22 EMT-D _____ ALS _____
BLS _____ LALS _____ Other _____

Total Number of Dispatchers: 22

Ownership:

- Public
- Private

If Public:

- Fire
- Law
- Other EMS

If Public:

- City
- County
- State
- Fire District
- Federal

Designated to Coordinate the Use of Air Ambulance or Air Rescue Aircraft: Yes No

Dispatch Resource

County: Santa Clara

Reporting Year: CY 2020

Dispatch Agency: ProTransport-1

Name of Primary Contact: _____

Address: 720 Portal Street
Cotati, CA 94931

Telephone Number: 800.650.4003

Written Contract:

- Yes
- No

Medical Director:

- Yes
- No

Availability:

- Day-to-Day
- Disaster

Number of Personnel Providing Services:

EMD Training _____ EMT-D _____ ALS _____
BLS _____ LALS _____ Other _____

Total Number of Dispatchers: 24

Ownership:

- Public
- Private

If Public:

- Fire
- Law
- Other _____

If Public:

- City
- County
- State
- Fire District
- Federal

Designated to Coordinate the Use of Air Ambulance or Air Rescue Aircraft: Yes No

Dispatch Resource

County: Santa Clara

Reporting Year: CY 2020

Dispatch Agency: Royal Ambulance

Name of Primary Contact: _____

Address: 14472 Wicks Blvd.
San Leandro, CA 94577

Telephone Number: 888.510.3687
510.568.6161

Written Contract:

- Yes
- No

Medical Director:

- Yes
- No

Availability:

- Day-to-Day
- Disaster

Number of Personnel Providing Services:

EMD Training _____ EMT-D _____ ALS _____
BLS _____ LALS _____ Other _____

Total Number of Dispatchers: 15

Ownership:

- Public
- Private

If Public:

- Fire
- Law
- Other _____

If Public:

- City
- County
- State
- Fire District
- Federal

Designated to Coordinate the Use of Air Ambulance or Air Rescue Aircraft: Yes No

Dispatch Resource

County: Santa Clara

Reporting Year: CY 2020

Dispatch Agency: CALFIRE-Santa Clara Unit [ECC]

Name of Primary Contact: Jesse Winnen

Address: 15670 Monterey Street
Morgan Hill, CA 95037

Telephone Number: 408.779.2121

Written Contract:

- Yes
- No

Medical Director:

- Yes
- No

Availability:

- Day-to-Day
- Disaster

Number of Personnel Providing Services:

EMD Training _____ EMT-D _____ ALS _____
BLS _____ LALS _____ Other 12

Total Number of Dispatchers: 12

Ownership:

- Public
- Private

If Public:

- Fire
- Law
- Other _____

If Public:

- City
- County
- State
- Fire District
- Federal

Designated to Coordinate the Use of Air Ambulance or Air Rescue Aircraft: Yes No

Dispatch Resource

County: Santa Clara

Reporting Year: CY 2020

Dispatch Agency: City of San Jose, Fire Department

Name of Primary Contact: _____

Address: 855 North San Pedro Street
San Jose, CA 95110

Telephone Number: 408.277.5486

Written Contract:

- Yes
- No

Medical Director:

- Yes
- No

Availability:

- Day-to-Day
- Disaster

Number of Personnel Providing Services:

EMD Training 36 EMT-D _____ ALS _____
BLS _____ LALS _____ Other _____

Total Number of Dispatchers: 36

Ownership:

- Public
- Private

If Public:

- Fire
- Law
- Other EMS

If Public:

- City
- County
- State
- Fire District
- Federal

Designated to Coordinate the Use of Air Ambulance or Air Rescue Aircraft: Yes No

Dispatch Resource

County: Santa Clara **Reporting Year:** CY 2020

Dispatch Agency: City of Santa Clara, Police Department **Name of Primary Contact:** _____

Address: 777 Benton Street **Telephone Number:** 408.615.5580
Santa Clara, CA 95030

Written Contract: Yes No
Medical Director: Yes No
Availability: Day-to-Day Disaster
Number of Personnel Providing Services:
EMD Training _____ EMT-D _____ ALS _____
BLS _____ LALS _____ Other _____
Total Number of Dispatchers: 18

Ownership: Public Private
If Public: Fire Law Other EMS
If Public: City County State Fire District Federal

Designated to Coordinate the Use of Air Ambulance or Air Rescue Aircraft: Yes No

Dispatch Resource

County: Santa Clara **Reporting Year:** CY 2020

Dispatch Agency: City of Sunnyvale, Department of Public Safety **Name of Primary Contact:** Michael Spath

Address: 700 All America Way **Telephone Number:** 408.730.7162
Sunnyvale, CA 94088

Written Contract: Yes No
Medical Director: Yes No
Availability: Day-to-Day Disaster
Number of Personnel Providing Services:
EMD Training _____ EMT-D _____ ALS _____
BLS _____ LALS _____ Other _____
Total Number of Dispatchers: 20

Ownership: Public Private
If Public: Fire Law Other EMS
If Public: City County State Fire District Federal

Designated to Coordinate the Use of Air Ambulance or Air Rescue Aircraft: Yes No

Dispatch Resource

County: Santa Clara

Reporting Year: CY 2020

Dispatch Agency: Silicon Valley Ambulance

Name of Primary Contact: _____

Address: 181 Martinvale Lane
San Jose, CA 95119

Telephone Number: 877.778.4911
408.225.2212

Written Contract:

- Yes
- No

Medical Director:

- Yes
- No

Availability:

- Day-to-Day
- Disaster

Number of Personnel Providing Services:

EMD Training _____ EMT-D _____ ALS _____
BLS _____ LALS _____ Other _____

Total Number of Dispatchers: 4

Ownership:

- Public
- Private

If Public:

- Fire
- Law
- Other _____

If Public:

- City
- County
- State
- Fire District
- Federal

Designated to Coordinate the Use of Air Ambulance or Air Rescue Aircraft: Yes No

Dispatch Resource

County: Santa Clara

Reporting Year: CY 2020

Dispatch Agency: United Ambulance

Name of Primary Contact: _____

Address: 3530 Breakwater Court
Hayward, CA 94545

Telephone Number: 510.671.0031

Written Contract:

- Yes
- No

Medical Director:

- Yes
- No

Availability:

- Day-to-Day
- Disaster

Number of Personnel Providing Services:

EMD Training _____ EMT-D _____ ALS _____
BLS _____ LALS _____ Other _____

Total Number of Dispatchers: 8

Ownership:

- Public
- Private

If Public:

- Fire
- Law
- Other _____

If Public:

- City
- County
- State
- Fire District
- Federal

Designated to Coordinate the Use of Air Ambulance or Air Rescue Aircraft: Yes No

Dispatch Resource

County: Santa Clara

Reporting Year: CY 2020

Dispatch Agency: Westmed Ambulance Service

Name of Primary Contact: _____

Address: 14275 Wicks Blvd.
San Leandro, CA 94577

Telephone Number: 510.614.1420
888.331.1420

Written Contract:

- Yes
- No

Medical Director:

- Yes
- No

Availability:

- Day-to-Day
- Disaster

Number of Personnel Providing Services:

EMD Training _____ EMT-D _____ ALS _____
BLS _____ LALS _____ Other _____

Total Number of Dispatchers: 10

Ownership:

- Public
- Private

If Public:

- Fire
- Law
- Other _____

If Public:

- City
- County
- State
- Fire District
- Federal

Designated to Coordinate the Use of Air Ambulance or Air Rescue Aircraft: Yes No

TABLE 4:
RESPONSE AND TRANSPORTATION

County: Santa Clara

Reporting Year: CY 2020

EMS Agency Response

Does the LEMSA have policies for emergency medical transport vehicles at appropriate levels that can be pre-scheduled without negative medical impact?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
Are all emergency medical transport vehicles staffed and equipped according to current state and local EMS agency regulations and appropriately equipped for the level of service provided?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
Are all qualified EMS first responder agencies (including public safety agencies and industrial first aid teams) integrated into the system?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
Has the LEMSA identified the availability and staffing of all medical and rescue aircraft for emergency patient transportation within the EMS area?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
Does the LEMSA have a process for categorizing medical and rescue aircraft and have policies and procedures regarding:		
a) Authorization of aircraft; to be utilized in patient care?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
b) Requesting of EMS aircraft?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
c) Dispatching of EMS aircraft?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
d) Determination of EMS aircraft destination?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
e) Orientation of pilots and medical flight crews to the local EMS system?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
f) Addressing and resolving formal complaints regarding EMS aircraft?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
Has the LEMSA identified availability/staffing of snow mobiles, and all-terrain and water rescue transportation vehicles?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
Does the LEMSA have a mechanism (e.g. an ordinance and/or written provider agreements) to ensure that EMS transportation agencies comply with applicable policies and procedures regarding system operations and clinical care?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No

EMS Agency Response (cont.)

SYSTEM STANDARD RESPONSE TIMES (90th Percentile) Enter response times in appropriate boxes:	METROPOLITAN/ URBAN	SUBURBAN/RURAL	WILDERNESS	SYSTEMWIDE
BLS & CPR capable first responder	00:07:59 minute	00:09:59 minute	00:11:59 minute	N/A
Limited Advanced Life Support responder	N/A	N/A	N/A	N/A
Advanced Life Support responder	00:07:59 minute	00:09:59 minute	00:11:59 minute	N/A
Transport Ambulance	00:11:59 minute	00:16:59 minute	00:21:59 minute	N/A
Trauma Centers Level I Level II Level III Level IV	00:07:59 minute	00:09:59 minute	00:11:59 minute	N/A
Pediatric Hospitals Comprehensive Advanced General Basic	00:07:59 minute	00:09:59 minute	00:11:59 minute	N/A
STEMI Care Center STEMI Receiving Center STEMI Referring Hospital	00:07:59 minute	00:09:59 minute	00:11:59 minute	N/A
Stroke Care Center Comprehensive Thrombectomy-Capable Primary Acute Stroke Ready	00:07:59 minute	00:09:59 minute	00:11:59 minute	N/A



TABLE 4: RESPONSE AND TRANSPORTATION

CY2020

Provider Resource

American Medical Response; subsidiary of Global Medical Response

County: Santa Clara **Provider:** _____ **Response Area:** Santa Clara

Address: 13992 Catalina Street
San Leandro, CA 94577

Phone Number: 855.788.8370 / 530.457.5062

Number of Ambulances, Air Rescue, or Air Ambulance Vehicles in fleet: _____ 6

Average number of Ambulances and/or Air Rescue Vehicles/Air Ambulances on duty at 12:00 p.m. (noon) on any given day: _____ 3

Number of Non-Ambulance Medical Transport Litter Vans (gurney van) and/or wheelchair vans: _____ 2

Ambulance Strike Team Participant: Yes No

Number of Helicopters based in this LEMSA's jurisdiction: _____ 0

Written ALS Agreement with LEMSA to Participate in EMS System: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Medical Director: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	System Available 24 Hours: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Level of Service:			
			<input checked="" type="checkbox"/> Transport <input type="checkbox"/> Non-Transport	<input type="checkbox"/> ALS <input type="checkbox"/> LALS <input checked="" type="checkbox"/> BLS	<input type="checkbox"/> 9-1-1 <input checked="" type="checkbox"/> 7-Digit <input checked="" type="checkbox"/> CCT <input checked="" type="checkbox"/> IFT	<input checked="" type="checkbox"/> Ground <input type="checkbox"/> Air
		<input type="checkbox"/> Non-Ambulance Medical Transport Services	<input type="checkbox"/> Litter/Gurney Van	<input checked="" type="checkbox"/> Wheelchair Van		



TABLE 4: RESPONSE AND TRANSPORTATION

Ownership: <input type="checkbox"/> Public <input checked="" type="checkbox"/> Private	If Public: <input type="checkbox"/> Fire <input type="checkbox"/> Law <input type="checkbox"/> Other _____	If Public: <input type="checkbox"/> City <input type="checkbox"/> State <input type="checkbox"/> Federal	<input type="checkbox"/> County <input type="checkbox"/> Fire District	If Air: <input type="checkbox"/> Rotary <input type="checkbox"/> Fixed Wing	Air Classification: <input type="checkbox"/> Auxiliary Rescue <input type="checkbox"/> Air Ambulance <input type="checkbox"/> ALS Rescue <input type="checkbox"/> BLS Rescue
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Provider Resource (cont.)

CEMSIS Provider ID #: S44-50088

Name of ePCR Vendor: MEDS

Contract Dates: 07/01/2019 to 06/30/2024

Ground Non-Transporting and/or Transporting Agencies

<u>245</u>	Total number of responses
<u>0</u>	Number of emergency responses
<u>245</u>	Number of non-emergency responses

Ground Transporting Agencies

<u>245</u>	Total number of transports
<u>0</u>	Number of emergency transports
<u>245</u>	Number of non-emergency transports

Air Transporting Services

<u>0</u>	Total number of responses
<u>0</u>	Number of emergency responses
<u>0</u>	Number of non-emergency responses

<u>0</u>	Total number of transports
<u>0</u>	Number of emergency transports
<u>0</u>	Number of non-emergency transports

Provider Staff Information

Total number of certified EMTs in the field:	<u>110</u>
Total number of certified Advanced EMTs in the field:	<u>0</u>
Total number of certified/accredited Paramedics in the field:	<u>0</u>

Provider Resource

<p>County: <u>Santa Clara</u></p> <p>Address: <u>540 Cohnasey Avenue</u> <u>Gilroy, CA 95020</u></p> <p>Phone Number: <u>916.921.4000</u></p>	<p>Provider: <u>CALSTAR / REACH Air Ambulance;</u> <u>subsidiary of Global Medical Response</u></p> <p>Response Area: <u>Santa Clara County</u></p>
<p>Ambulance Strike Team Participant: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>	
<p>Number of Ambulances, Air Rescue, or Air Ambulance Vehicles in fleet: <u>2</u></p> <p>Average number of Ambulances and/or Air Rescue Vehicles/Air Ambulances on duty at 12:00 p.m. (noon) on any given day: <u>2</u></p> <p>Number of Non-Ambulance Medical Transport Litter Vans (gurney van) and/or wheelchair vans: <u>0</u></p> <p>Number of Helicopters based in this LEMSA's jurisdiction: <u>1</u></p>	

<p>Written ALS Agreement with LEMSA to Participate in EMS System:</p> <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p>Medical Director:</p> <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p>System Available 24 Hours:</p> <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p style="text-align: center;">Level of Service:</p> <table border="0" style="width: 100%;"> <tr> <td><input checked="" type="checkbox"/> Transport</td> <td><input checked="" type="checkbox"/> ALS</td> <td><input checked="" type="checkbox"/> 9-1-1</td> <td><input type="checkbox"/> Ground</td> </tr> <tr> <td><input type="checkbox"/> Non-Transport</td> <td><input type="checkbox"/> LALS</td> <td><input type="checkbox"/> 7-Digit</td> <td><input checked="" type="checkbox"/> Air</td> </tr> <tr> <td></td> <td><input type="checkbox"/> BLS</td> <td><input checked="" type="checkbox"/> CCT</td> <td></td> </tr> <tr> <td></td> <td></td> <td><input checked="" type="checkbox"/> IFT</td> <td></td> </tr> </table> <p>Other Specialty Services (water, snow, etc.): _____</p> <table border="0" style="width: 100%;"> <tr> <td><input type="checkbox"/> Non-Ambulance Medical Transport Services</td> <td><input type="checkbox"/> Litter/Gurney Van</td> <td><input type="checkbox"/> Wheelchair Van</td> </tr> </table>	<input checked="" type="checkbox"/> Transport	<input checked="" type="checkbox"/> ALS	<input checked="" type="checkbox"/> 9-1-1	<input type="checkbox"/> Ground	<input type="checkbox"/> Non-Transport	<input type="checkbox"/> LALS	<input type="checkbox"/> 7-Digit	<input checked="" type="checkbox"/> Air		<input type="checkbox"/> BLS	<input checked="" type="checkbox"/> CCT				<input checked="" type="checkbox"/> IFT		<input type="checkbox"/> Non-Ambulance Medical Transport Services	<input type="checkbox"/> Litter/Gurney Van	<input type="checkbox"/> Wheelchair Van
<input checked="" type="checkbox"/> Transport	<input checked="" type="checkbox"/> ALS	<input checked="" type="checkbox"/> 9-1-1	<input type="checkbox"/> Ground																			
<input type="checkbox"/> Non-Transport	<input type="checkbox"/> LALS	<input type="checkbox"/> 7-Digit	<input checked="" type="checkbox"/> Air																			
	<input type="checkbox"/> BLS	<input checked="" type="checkbox"/> CCT																				
		<input checked="" type="checkbox"/> IFT																				
<input type="checkbox"/> Non-Ambulance Medical Transport Services	<input type="checkbox"/> Litter/Gurney Van	<input type="checkbox"/> Wheelchair Van																				

Ownership: <input type="checkbox"/> Public <input checked="" type="checkbox"/> Private	If Public: <input type="checkbox"/> Fire <input type="checkbox"/> Law <input type="checkbox"/> Other _____	If Public: <input type="checkbox"/> City <input type="checkbox"/> State <input type="checkbox"/> Federal	<input type="checkbox"/> County <input type="checkbox"/> Fire District	If Air: <input checked="" type="checkbox"/> Rotary <input type="checkbox"/> Fixed Wing	Air Classification: <input type="checkbox"/> Auxiliary Rescue <input checked="" type="checkbox"/> Air Ambulance <input type="checkbox"/> ALS Rescue <input type="checkbox"/> BLS Rescue
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Provider Resource (cont.)

CEMSIS Provider ID #: S43-50193

Name of ePCR Vendor: ImageTrend

Contract Dates: 04/01/2013 to 03/31/2021

Ground Non-Transporting and/or Transporting Agencies

0 Total number of responses
0 Number of emergency responses
0 Number of non-emergency responses

Ground Transporting Agencies

0 Total number of transports
0 Number of emergency transports
0 Number of non-emergency transports

Air Transporting Services

68 Total number of responses
68 Number of emergency responses
0 Number of non-emergency responses

40 Total number of transports
40 Number of emergency transports
0 Number of non-emergency transports

Provider Staff Information

Total number of certified EMTs in the field: 0

Total number of certified Advanced EMTs in the field: 0

Total number of certified/accredited Paramedics in the field: 7

Provider Resource

County: Santa Clara **Provider:** Santa Clara County Central Fire District **Response Area:** Santa Clara County

Address: 14700 Winchester Blvd.
Los Gatos, CA 95032

Phone Number: 408.378.4010

Number of Ambulances, Air Rescue, or Air Ambulance Vehicles in fleet: 0

Average number of Ambulances and/or Air Rescue Vehicles/Air Ambulances on duty at 12:00 p.m. (noon) on any given day: 0

Number of Non-Ambulance Medical Transport Litter Vans (gurney van) and/or wheelchair vans: 0

Ambulance Strike Team Participant: Yes No

Number of Helicopters based in this LEMSA's jurisdiction: 0

<p>Written ALS Agreement with LEMSA to Participate in EMS System:</p> <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p>Medical Director:</p> <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p>System Available 24 Hours:</p> <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p>Level of Service:</p> <p> <input type="checkbox"/> Transport <input checked="" type="checkbox"/> ALS <input checked="" type="checkbox"/> 9-1-1 <input checked="" type="checkbox"/> Ground <input checked="" type="checkbox"/> Non-Transport <input type="checkbox"/> LALS <input checked="" type="checkbox"/> 7-Digit <input type="checkbox"/> Air <input checked="" type="checkbox"/> BLS <input type="checkbox"/> CCT <input type="checkbox"/> IFT </p> <p>Other Specialty Services (water, snow, etc.): _____</p> <p> <input type="checkbox"/> Non-Ambulance Medical Transport Services <input type="checkbox"/> Litter/Gurney Van <input type="checkbox"/> Wheelchair Van </p>
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Ownership: <input checked="" type="checkbox"/> Public <input type="checkbox"/> Private	If Public: <input checked="" type="checkbox"/> Fire <input type="checkbox"/> Law <input type="checkbox"/> Other _____	If Public: <input type="checkbox"/> City <input type="checkbox"/> State <input type="checkbox"/> Federal	<input type="checkbox"/> County <input checked="" type="checkbox"/> Fire District	If Air: <input type="checkbox"/> Rotary <input type="checkbox"/> Fixed Wing	Air Classification: <input type="checkbox"/> Auxiliary Rescue <input type="checkbox"/> Air Ambulance <input type="checkbox"/> ALS Rescue <input type="checkbox"/> BLS Rescue
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Provider Resource (cont.)

CEMSIS Provider ID #: S43-51114

Name of ePCR Vendor: ImageTrend

Contract Dates: 07/01/2011 to 06/30/2022

Ground Non-Transporting and/or Transporting Agencies

22,303 Total number of responses
17,088 Number of emergency responses
5,215 Number of non-emergency responses

Ground Transporting Agencies

0 Total number of transports
0 Number of emergency transports
0 Number of non-emergency transports

Air Transporting Services

0 Total number of responses
0 Number of emergency responses
0 Number of non-emergency responses

0 Total number of transports
0 Number of emergency transports
0 Number of non-emergency transports

Provider Staff Information

Total number of certified EMTs in the field: 127

Total number of certified Advanced EMTs in the field: 0

Total number of certified/accredited Paramedics in the field: 86



TABLE 4: RESPONSE AND TRANSPORTATION

CY2020

Provider Resource

County: Santa Clara **Provider:** Falcon Critical Care Transport **Response Area:** Santa Clara County

Address: 3508 San Pablo Dam Road; El Sobrante, CA 94803
154 San Laranzo Blvd; Sunnyvale, CA 94086

Phone Number: 510.223.1171

Ambulance Strike Team Participant: Yes No

Number of Ambulances, Air Rescue, or Air Ambulance Vehicles in fleet: 11

Average number of Ambulances and/or Air Rescue Vehicles/Air Ambulances on duty at 12:00 p.m. (noon) on any given day: 8

Number of Non-Ambulance Medical Transport Litter Vans (gurney van) and/or wheelchair vans: 0

Number of Helicopters based in this LEMSA's jurisdiction: 0

Written ALS Agreement with LEMSA to Participate in EMS System: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Medical Director: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	System Available 24 Hours: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Level of Service:				
			<input checked="" type="checkbox"/> Transport <input type="checkbox"/> Non-Transport	<input type="checkbox"/> ALS <input type="checkbox"/> LALS <input checked="" type="checkbox"/> BLS	<input type="checkbox"/> 9-1-1 <input checked="" type="checkbox"/> 7-Digit <input checked="" type="checkbox"/> CCT <input checked="" type="checkbox"/> IFT	<input checked="" type="checkbox"/> Ground <input type="checkbox"/> Air	Other Specialty Services (water, snow, etc.): _____ _____
		<input type="checkbox"/> Non-Ambulance Medical Transport Services		<input type="checkbox"/> Litter/Gurney Van		<input type="checkbox"/> Wheelchair Van	



TABLE 4: RESPONSE AND TRANSPORTATION

Ownership: <input type="checkbox"/> Public <input checked="" type="checkbox"/> Private	If Public: <input type="checkbox"/> Fire <input type="checkbox"/> Law <input type="checkbox"/> Other _____	If Public: <input type="checkbox"/> City <input type="checkbox"/> State <input type="checkbox"/> Federal	<input type="checkbox"/> County <input type="checkbox"/> Fire District	If Air: <input type="checkbox"/> Rotary <input type="checkbox"/> Fixed Wing	Air Classification: <input type="checkbox"/> Auxiliary Rescue <input type="checkbox"/> Air Ambulance <input type="checkbox"/> ALS Rescue <input type="checkbox"/> BLS Rescue
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Provider Resource (cont.)

CEMSIS Provider ID #: S44-50390

Name of ePCR Vendor: Traumasoft

Contract Dates: 07/01/2019 to 06/30/2024

Ground Non-Transporting and/or Transporting Agencies

3,225 Total number of responses
0 Number of emergency responses
3,225 Number of non-emergency responses

Ground Transporting Agencies

3,225 Total number of transports
0 Number of emergency transports
3,225 Number of non-emergency transports

Air Transporting Services

0 Total number of responses
0 Number of emergency responses
0 Number of non-emergency responses

0 Total number of transports
0 Number of emergency transports
0 Number of non-emergency transports

Provider Staff Information

Total number of certified EMTs in the field: 60
 Total number of certified Advanced EMTs in the field: 0
 Total number of certified/accredited Paramedics in the field: 0

Provider Resource

County: Santa Clara **Provider:** City of Gilroy, Fire Department **Response Area:** Santa Clara County

Address: 7070 Chestnut Street
Gilroy, CA 95020

Number of Ambulances, Air Rescue, or Air Ambulance Vehicles in fleet: 1

Phone Number: 408.848.0385

Average number of Ambulances and/or Air Rescue Vehicles/Air Ambulances on duty at 12:00 p.m. (noon) on any given day: 1

Number of Non-Ambulance Medical Transport Litter Vans (gurney van) and/or wheelchair vans: 0

Ambulance Strike Team Participant: Yes No

Number of Helicopters based in this LEMSA's jurisdiction: 0

<p>Written ALS Agreement with LEMSA to Participate in EMS System:</p> <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p>Medical Director:</p> <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p>System Available 24 Hours:</p> <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p>Level of Service:</p> <p> <input checked="" type="checkbox"/> Transport <input checked="" type="checkbox"/> ALS <input checked="" type="checkbox"/> 9-1-1 <input checked="" type="checkbox"/> Ground <input checked="" type="checkbox"/> Non-Transport <input type="checkbox"/> LALS <input checked="" type="checkbox"/> 7-Digit <input type="checkbox"/> Air <input checked="" type="checkbox"/> BLS <input type="checkbox"/> CCT <input type="checkbox"/> IFT </p> <p>Other Specialty Services (water, snow, etc.): _____</p> <p> <input type="checkbox"/> Non-Ambulance Medical Transport Services <input type="checkbox"/> Litter/Gurney Van <input type="checkbox"/> Wheelchair Van </p>
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Ownership: <input checked="" type="checkbox"/> Public <input type="checkbox"/> Private	If Public: <input checked="" type="checkbox"/> Fire <input type="checkbox"/> Law <input type="checkbox"/> Other _____	If Public: <input checked="" type="checkbox"/> City <input type="checkbox"/> State <input type="checkbox"/> Federal	<input type="checkbox"/> County <input type="checkbox"/> Fire District	If Air: <input type="checkbox"/> Rotary <input type="checkbox"/> Fixed Wing	Air Classification: <input type="checkbox"/> Auxiliary Rescue <input type="checkbox"/> Air Ambulance <input type="checkbox"/> ALS Rescue <input type="checkbox"/> BLS Rescue
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Provider Resource (cont.)

CEMSIS Provider ID #: S43-50428

Name of ePCR Vendor: ImageTrend

Contract Dates: 07/01/2011 to 06/30/2022

Ground Non-Transporting and/or Transporting Agencies

<u>4,130</u>	Total number of responses
<u>4,130</u>	Number of emergency responses
<u>0</u>	Number of non-emergency responses

Ground Transporting Agencies

<u>1</u>	Total number of transports
<u>1</u>	Number of emergency transports
<u>0</u>	Number of non-emergency transports

Air Transporting Services

<u>0</u>	Total number of responses
<u>0</u>	Number of emergency responses
<u>0</u>	Number of non-emergency responses

<u>0</u>	Total number of transports
<u>0</u>	Number of emergency transports
<u>0</u>	Number of non-emergency transports

Provider Staff Information

Total number of certified EMTs in the field: 8

Total number of certified Advanced EMTs in the field: 0

Total number of certified/accredited Paramedics in the field: 21

Provider Resource

County: Santa Clara **Provider:** Stanford Life Flight **Response Area:** Santa Clara County

Address: 300 Pasteur Drive
Stanford, CA 94305

Phone Number: 650.723.5578

Number of Ambulances, Air Rescue, or Air Ambulance Vehicles in fleet: 1

Average number of Ambulances and/or Air Rescue Vehicles/Air Ambulances on duty at 12:00 p.m. (noon) on any given day: 1

Number of Non-Ambulance Medical Transport Litter Vans (gurney van) and/or wheelchair vans: 0

Ambulance Strike Team Participant: Yes No

Number of Helicopters based in this LEMSA's jurisdiction: 1

<p>Written ALS Agreement with LEMSA to Participate in EMS System:</p> <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p>Medical Director:</p> <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p>System Available 24 Hours:</p> <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p>Level of Service:</p> <p> <input checked="" type="checkbox"/> Transport <input checked="" type="checkbox"/> ALS <input checked="" type="checkbox"/> 9-1-1 <input type="checkbox"/> Ground <input type="checkbox"/> Non-Transport <input type="checkbox"/> LALS <input type="checkbox"/> 7-Digit <input checked="" type="checkbox"/> Air <input type="checkbox"/> BLS <input checked="" type="checkbox"/> CCT <input checked="" type="checkbox"/> IFT </p> <p>Other Specialty Services (water, snow, etc.): _____</p> <p> <input type="checkbox"/> Non-Ambulance Medical Transport Services <input type="checkbox"/> Litter/Gurney Van <input type="checkbox"/> Wheelchair Van </p>
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Ownership: <input type="checkbox"/> Public <input checked="" type="checkbox"/> Private	If Public: <input type="checkbox"/> Fire <input type="checkbox"/> Law <input type="checkbox"/> Other _____	If Public: <input type="checkbox"/> City <input type="checkbox"/> State <input type="checkbox"/> Federal	<input type="checkbox"/> County <input type="checkbox"/> Fire District	If Air: <input checked="" type="checkbox"/> Rotary <input type="checkbox"/> Fixed Wing	Air Classification: <input type="checkbox"/> Auxiliary Rescue <input checked="" type="checkbox"/> Air Ambulance <input type="checkbox"/> ALS Rescue <input type="checkbox"/> BLS Rescue
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Provider Resource (cont.)

CEMSIS Provider ID #: S43-50905

Name of ePCR Vendor: ImageTrend

Contract Dates: 04/01/2013 to 03/31/2021

Ground Non-Transporting and/or Transporting Agencies

0 Total number of responses
0 Number of emergency responses
0 Number of non-emergency responses

Ground Transporting Agencies

0 Total number of transports
0 Number of emergency transports
0 Number of non-emergency transports

Air Transporting Services

845 Total number of responses
8 Number of emergency responses
837 Number of non-emergency responses

436 Total number of transports
0 Number of emergency transports
436 Number of non-emergency transports

Provider Staff Information

Total number of certified EMTs in the field: 0

Total number of certified Advanced EMTs in the field: 0

Total number of certified/accredited Paramedics in the field: 0

Total number of Flight Nurses: 18

Provider Resource

County: Santa Clara **Provider:** City of Milpitas, Fire Department **Response Area:** Santa Clara County

Address: 777 Main Street
Milpitas, CA 95035

Phone Number: 408.568.2800

Number of Ambulances, Air Rescue, or Air Ambulance Vehicles in fleet: 1

Average number of Ambulances and/or Air Rescue Vehicles/Air Ambulances on duty at 12:00 p.m. (noon) on any given day: 1

Number of Non-Ambulance Medical Transport Litter Vans (gurney van) and/or wheelchair vans: 0

Ambulance Strike Team Participant: Yes No

Number of Helicopters based in this LEMSA's jurisdiction: 0

<p>Written ALS Agreement with LEMSA to Participate in EMS System:</p> <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p>Medical Director:</p> <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p>System Available 24 Hours:</p> <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p>Level of Service:</p> <p> <input checked="" type="checkbox"/> Transport <input checked="" type="checkbox"/> ALS <input checked="" type="checkbox"/> 9-1-1 <input checked="" type="checkbox"/> Ground <input checked="" type="checkbox"/> Non-Transport <input type="checkbox"/> LALS <input checked="" type="checkbox"/> 7-Digit <input type="checkbox"/> Air <input checked="" type="checkbox"/> BLS <input type="checkbox"/> CCT <input type="checkbox"/> IFT </p> <p>Other Specialty Services (water, snow, etc.): _____</p> <p> <input type="checkbox"/> Non-Ambulance Medical Transport Services <input type="checkbox"/> Litter/Gurney Van <input type="checkbox"/> Wheelchair Van </p>
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Ownership: <input checked="" type="checkbox"/> Public <input type="checkbox"/> Private	If Public: <input checked="" type="checkbox"/> Fire <input type="checkbox"/> Law <input type="checkbox"/> Other _____	If Public: <input checked="" type="checkbox"/> City <input type="checkbox"/> State <input type="checkbox"/> Federal	<input type="checkbox"/> County <input type="checkbox"/> Fire District	If Air: <input type="checkbox"/> Rotary <input type="checkbox"/> Fixed Wing	Air Classification: <input type="checkbox"/> Auxiliary Rescue <input type="checkbox"/> Air Ambulance <input type="checkbox"/> ALS Rescue <input type="checkbox"/> BLS Rescue
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Provider Resource (cont.)

CEMSIS Provider ID #: S43-51112

Name of ePCR Vendor: ImageTrend

Contract Dates: 07/01/2011 to 06/30/2022

Ground Non-Transporting and/or Transporting Agencies

3,459 Total number of responses
3,459 Number of emergency responses
0 Number of non-emergency responses

Ground Transporting Agencies

0 Total number of transports
0 Number of emergency transports
0 Number of non-emergency transports

Air Transporting Services

0 Total number of responses
0 Number of emergency responses
0 Number of non-emergency responses

0 Total number of transports
0 Number of emergency transports
0 Number of non-emergency transports

Provider Staff Information

Total number of certified EMTs in the field: 35

Total number of certified Advanced EMTs in the field: 0

Total number of certified/accredited Paramedics in the field: 24



TABLE 4: RESPONSE AND TRANSPORTATION

CY2020

Provider Resource

NASA-Ames Fire Department [provided by Fiore Industries, Inc.]

County: Santa Clara **Provider:** _____ **Response Area:** Santa Clara County

Address: 580 Zook Road
Moffett Field, CA 94035

Phone Number: 650.604.5416

Number of Ambulances, Air Rescue, or Air Ambulance Vehicles in fleet: _____ 0

Average number of Ambulances and/or Air Rescue Vehicles/Air Ambulances on duty at 12:00 p.m. (noon) on any given day: _____ 0

Number of Non-Ambulance Medical Transport Litter Vans (gurney van) and/or wheelchair vans: _____ 0

Ambulance Strike Team Participant: Yes No

Number of Helicopters based in this LEMSA's jurisdiction: _____ 0

Written ALS Agreement with LEMSA to Participate in EMS System: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Medical Director: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	System Available 24 Hours: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Level of Service:			
			<input type="checkbox"/> Transport <input checked="" type="checkbox"/> Non-Transport	<input type="checkbox"/> ALS <input type="checkbox"/> LALS <input checked="" type="checkbox"/> BLS	<input type="checkbox"/> 9-1-1 <input checked="" type="checkbox"/> 7-Digit <input type="checkbox"/> CCT <input type="checkbox"/> IFT	<input type="checkbox"/> Ground <input type="checkbox"/> Air
		<input type="checkbox"/> Non-Ambulance Medical Transport Services		<input type="checkbox"/> Litter/Gurney Van	<input type="checkbox"/> Wheelchair Van	



TABLE 4: RESPONSE AND TRANSPORTATION

Ownership: <input type="checkbox"/> Public <input checked="" type="checkbox"/> Private	If Public: <input type="checkbox"/> Fire <input type="checkbox"/> Law <input type="checkbox"/> Other _____	If Public: <input type="checkbox"/> City <input type="checkbox"/> State <input type="checkbox"/> Federal	<input type="checkbox"/> County <input type="checkbox"/> Fire District	If Air: <input type="checkbox"/> Rotary <input type="checkbox"/> Fixed Wing	Air Classification: <input type="checkbox"/> Auxiliary Rescue <input type="checkbox"/> Air Ambulance <input type="checkbox"/> ALS Rescue <input type="checkbox"/> BLS Rescue
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Provider Resource (cont.)

CEMSIS Provider ID #: S43-51113

Name of ePCR Vendor: ImageTrend

Contract Dates: N/A; No agreement executed.

Ground Non-Transporting and/or Transporting Agencies

30 Total number of responses
30 Number of emergency responses
0 Number of non-emergency responses

Ground Transporting Agencies

0 Total number of transports
0 Number of emergency transports
0 Number of non-emergency transports

Air Transporting Services

0 Total number of responses
0 Number of emergency responses
0 Number of non-emergency responses

0 Total number of transports
0 Number of emergency transports
0 Number of non-emergency transports

Provider Staff Information

Total number of certified EMTs in the field: 39

Total number of certified Advanced EMTs in the field: 0

Total number of certified/accredited Paramedics in the field: 0

Provider Resource

City of Morgan Hill, Fire Department [provided by CALFIRE]

County: Santa Clara **Provider:** _____ **Response Area:** Santa Clara County

Address: 17575 Peak Avenue
Morgan Hill, CA 95037

Number of Ambulances, Air Rescue, or Air Ambulance Vehicles in fleet: _____ 1

Phone Number: 408.779.2121

Average number of Ambulances and/or Air Rescue Vehicles/Air Ambulances on duty at 12:00 p.m. (noon) on any given day: _____ 0

Number of Non-Ambulance Medical Transport Litter Vans (gurney van) and/or wheelchair vans: _____ 0

Ambulance Strike Team Participant: Yes No

Number of Helicopters based in this LEMSA's jurisdiction: _____ 0

<p>Written ALS Agreement with LEMSA to Participate in EMS System:</p> <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p>Medical Director:</p> <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p>System Available 24 Hours:</p> <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p>Level of Service:</p> <p><input checked="" type="checkbox"/> Transport <input checked="" type="checkbox"/> ALS <input checked="" type="checkbox"/> 9-1-1 <input checked="" type="checkbox"/> Ground <input checked="" type="checkbox"/> Non-Transport <input type="checkbox"/> LALS <input checked="" type="checkbox"/> 7-Digit <input type="checkbox"/> Air <input checked="" type="checkbox"/> BLS <input type="checkbox"/> CCT <input type="checkbox"/> IFT</p> <p>Other Specialty Services (water, snow, etc.): _____</p> <p><input type="checkbox"/> Non-Ambulance Medical Transport Services <input type="checkbox"/> Litter/Gurney Van <input type="checkbox"/> Wheelchair Van</p>
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Ownership: <input checked="" type="checkbox"/> Public <input type="checkbox"/> Private	If Public: <input checked="" type="checkbox"/> Fire <input type="checkbox"/> Law <input type="checkbox"/> Other _____	If Public: <input checked="" type="checkbox"/> City <input type="checkbox"/> State <input type="checkbox"/> Federal	<input type="checkbox"/> County <input type="checkbox"/> Fire District	If Air: <input type="checkbox"/> Rotary <input type="checkbox"/> Fixed Wing	Air Classification: <input type="checkbox"/> Auxiliary Rescue <input type="checkbox"/> Air Ambulance <input type="checkbox"/> ALS Rescue <input type="checkbox"/> BLS Rescue
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Provider Resource (cont.)

CEMSIS Provider ID #: S43-51729

Name of ePCR Vendor: ImageTrend

Contract Dates: 01/01/2013 to 06/30/2022

Ground Non-Transporting and/or Transporting Agencies

<u>2,584</u>	Total number of responses
<u>2,584</u>	Number of emergency responses
<u>0</u>	Number of non-emergency responses

Ground Transporting Agencies

<u>0</u>	Total number of transports
<u>0</u>	Number of emergency transports
<u>0</u>	Number of non-emergency transports

Air Transporting Services

<u>0</u>	Total number of responses
<u>0</u>	Number of emergency responses
<u>0</u>	Number of non-emergency responses

<u>0</u>	Total number of transports
<u>0</u>	Number of emergency transports
<u>0</u>	Number of non-emergency transports

Provider Staff Information

Total number of certified EMTs in the field: 6

Total number of certified Advanced EMTs in the field: 0

Total number of certified/accredited Paramedics in the field: 8

Provider Resource

County: Santa Clara **Provider:** City of Mountain View, Fire Department **Response Area:** Santa Clara County

Address: 1000 Villa Street
Mountain View, CA 94040

Phone Number: 650.903.6812

Number of Ambulances, Air Rescue, or Air Ambulance Vehicles in fleet: 0

Average number of Ambulances and/or Air Rescue Vehicles/Air Ambulances on duty at 12:00 p.m. (noon) on any given day: 0

Number of Non-Ambulance Medical Transport Litter Vans (gurney van) and/or wheelchair vans: 0

Ambulance Strike Team Participant: Yes No

Number of Helicopters based in this LEMSA's jurisdiction: 0

<p>Written ALS Agreement with LEMSA to Participate in EMS System:</p> <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p>Medical Director:</p> <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p>System Available 24 Hours:</p> <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p>Level of Service:</p> <p> <input type="checkbox"/> Transport <input checked="" type="checkbox"/> ALS <input checked="" type="checkbox"/> 9-1-1 <input checked="" type="checkbox"/> Ground <input checked="" type="checkbox"/> Non-Transport <input type="checkbox"/> LALS <input checked="" type="checkbox"/> 7-Digit <input type="checkbox"/> Air <input checked="" type="checkbox"/> BLS <input type="checkbox"/> CCT <input type="checkbox"/> IFT </p> <p>Other Specialty Services (water, snow, etc.): _____</p> <p> <input type="checkbox"/> Non-Ambulance Medical Transport Services <input type="checkbox"/> Litter/Gurney Van <input type="checkbox"/> Wheelchair Van </p>
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Ownership: <input checked="" type="checkbox"/> Public <input type="checkbox"/> Private	If Public: <input checked="" type="checkbox"/> Fire <input type="checkbox"/> Law <input type="checkbox"/> Other _____	If Public: <input checked="" type="checkbox"/> City <input type="checkbox"/> State <input type="checkbox"/> Federal	<input type="checkbox"/> County <input type="checkbox"/> Fire District	If Air: <input type="checkbox"/> Rotary <input type="checkbox"/> Fixed Wing	Air Classification: <input type="checkbox"/> Auxiliary Rescue <input type="checkbox"/> Air Ambulance <input type="checkbox"/> ALS Rescue <input type="checkbox"/> BLS Rescue
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Provider Resource (cont.)

CEMSIS Provider ID #: S43-51080

Name of ePCR Vendor: ImageTrend

Contract Dates: 07/01/2011 to 06/30/2022

Ground Non-Transporting and/or Transporting Agencies

<u>5,604</u>	Total number of responses
<u>4,315</u>	Number of emergency responses
<u>1,289</u>	Number of non-emergency responses

Ground Transporting Agencies

<u>0</u>	Total number of transports
<u>0</u>	Number of emergency transports
<u>0</u>	Number of non-emergency transports

Air Transporting Services

<u>0</u>	Total number of responses
<u>0</u>	Number of emergency responses
<u>0</u>	Number of non-emergency responses

<u>0</u>	Total number of transports
<u>0</u>	Number of emergency transports
<u>0</u>	Number of non-emergency transports

Provider Staff Information

Total number of certified EMTs in the field: 35

Total number of certified Advanced EMTs in the field: 0

Total number of certified/accredited Paramedics in the field: 26



TABLE 4: RESPONSE AND TRANSPORTATION

CY2020

Provider Resource

County: <u>Santa Clara</u>	Provider: <u>NORCAL Ambulance</u>	Response Area: <u>Santa Clara County</u>
Address: <u>3049 Independence Drive, Suite H Livermore, CA 94551</u>	Number of Ambulances, Air Rescue, or Air Ambulance Vehicles in fleet:	<u>10</u>
Phone Number: <u>866.755.3400</u>	Average number of Ambulances and/or Air Rescue Vehicles/Air Ambulances on duty at 12:00 p.m. (noon) on any given day:	<u>8</u>
	Number of Non-Ambulance Medical Transport Litter Vans (gurney van) and/or wheelchair vans:	<u>0</u>
Ambulance Strike Team Participant: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Number of Helicopters based in this LEMSA's jurisdiction:	<u>0</u>

Written ALS Agreement with LEMSA to Participate in EMS System: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Medical Director: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	System Available 24 Hours: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Level of Service: <input checked="" type="checkbox"/> Transport <input type="checkbox"/> ALS <input type="checkbox"/> 9-1-1 <input checked="" type="checkbox"/> Ground <input type="checkbox"/> Non-Transport <input type="checkbox"/> LALS <input checked="" type="checkbox"/> 7-Digit <input type="checkbox"/> Air <input checked="" type="checkbox"/> BLS <input checked="" type="checkbox"/> CCT <input checked="" type="checkbox"/> IFT Other Specialty Services (water, snow, etc.): _____ _____ <input type="checkbox"/> Non-Ambulance Medical Transport Services <input type="checkbox"/> Litter/Gurney Van <input type="checkbox"/> Wheelchair Van
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TABLE 4: RESPONSE AND TRANSPORTATION

Ownership: <input type="checkbox"/> Public <input checked="" type="checkbox"/> Private	If Public: <input type="checkbox"/> Fire <input type="checkbox"/> Law <input type="checkbox"/> Other _____	If Public: <input type="checkbox"/> City <input type="checkbox"/> State <input type="checkbox"/> Federal	<input type="checkbox"/> County <input type="checkbox"/> Fire District	If Air: <input type="checkbox"/> Rotary <input type="checkbox"/> Fixed Wing	Air Classification: <input type="checkbox"/> Auxiliary Rescue <input type="checkbox"/> Air Ambulance <input type="checkbox"/> ALS Rescue <input type="checkbox"/> BLS Rescue
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Provider Resource (cont.)

CEMSIS Provider ID #: S43-50672

Name of ePCR Vendor: Traumasoft - IPCR

Contract Dates: 07/01/2019 to 06/30/2024

Ground Non-Transporting and/or Transporting Agencies

<u>4,872</u>	Total number of responses
<u>967</u>	Number of emergency responses
<u>3,905</u>	Number of non-emergency responses

Ground Transporting Agencies

<u>3,898</u>	Total number of transports
<u>844</u>	Number of emergency transports
<u>3,054</u>	Number of non-emergency transports

Air Transporting Services

<u>0</u>	Total number of responses
<u>0</u>	Number of emergency responses
<u>0</u>	Number of non-emergency responses

<u>0</u>	Total number of transports
<u>0</u>	Number of emergency transports
<u>0</u>	Number of non-emergency transports

Provider Staff Information

Total number of certified EMTs in the field:	<u>237</u>
Total number of certified Advanced EMTs in the field:	<u>0</u>
Total number of certified/accredited Paramedics in the field:	<u>2</u>

Provider Resource

County: Santa Clara **Provider:** City of Palo Alto, Fire Department **Response Area:** Santa Clara County

Address: 250 Hamilton Avenue
Palo Alto, CA 94306

Number of Ambulances, Air Rescue, or Air Ambulance Vehicles in fleet: 6

Phone Number: 650.329.2220

Average number of Ambulances and/or Air Rescue Vehicles/Air Ambulances on duty at 12:00 p.m. (noon) on any given day: 3

Number of Non-Ambulance Medical Transport Litter Vans (gurney van) and/or wheelchair vans: 0

Ambulance Strike Team Participant: Yes No

Number of Helicopters based in this LEMSA's jurisdiction: 0

<p>Written ALS Agreement with LEMSA to Participate in EMS System:</p> <p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>	<p>Medical Director:</p> <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p>System Available 24 Hours:</p> <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p>Level of Service:</p> <p> <input checked="" type="checkbox"/> Transport <input checked="" type="checkbox"/> ALS <input checked="" type="checkbox"/> 9-1-1 <input checked="" type="checkbox"/> Ground <input checked="" type="checkbox"/> Non-Transport <input type="checkbox"/> LALS <input checked="" type="checkbox"/> 7-Digit <input type="checkbox"/> Air <input checked="" type="checkbox"/> BLS <input type="checkbox"/> CCT <input type="checkbox"/> IFT </p> <p>Other Specialty Services (water, snow, etc.): _____</p> <p> <input type="checkbox"/> Non-Ambulance Medical Transport Services <input type="checkbox"/> Litter/Gurney Van <input type="checkbox"/> Wheelchair Van </p>
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Ownership: <input checked="" type="checkbox"/> Public <input type="checkbox"/> Private	If Public: <input checked="" type="checkbox"/> Fire <input type="checkbox"/> Law <input type="checkbox"/> Other _____	If Public: <input checked="" type="checkbox"/> City <input type="checkbox"/> State <input type="checkbox"/> Federal	<input type="checkbox"/> County <input type="checkbox"/> Fire District	If Air: <input type="checkbox"/> Rotary <input type="checkbox"/> Fixed Wing	Air Classification: <input type="checkbox"/> Auxiliary Rescue <input type="checkbox"/> Air Ambulance <input type="checkbox"/> ALS Rescue <input type="checkbox"/> BLS Rescue
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Provider Resource (cont.)

CEMSIS Provider ID #: S43-50710

Name of ePCR Vendor: ESO

Contract Dates: N/A; No agreement executed.

Ground Non-Transporting and/or Transporting Agencies

<u>4,354</u>	Total number of responses
<u>4,354</u>	Number of emergency responses
<u>0</u>	Number of non-emergency responses

Ground Transporting Agencies

<u>3,023</u>	Total number of transports
<u>3,023</u>	Number of emergency transports
<u>0</u>	Number of non-emergency transports

Air Transporting Services

<u>0</u>	Total number of responses
<u>0</u>	Number of emergency responses
<u>0</u>	Number of non-emergency responses

<u>0</u>	Total number of transports
<u>0</u>	Number of emergency transports
<u>0</u>	Number of non-emergency transports

Provider Staff Information

Total number of certified EMTs in the field: 36

Total number of certified Advanced EMTs in the field: 0

Total number of certified/accredited Paramedics in the field: 53



TABLE 4: RESPONSE AND TRANSPORTATION

CY2020

Provider Resource

County: Santa Clara **Provider:** ProTransport-1 **Response Area:** Santa Clara County

Address: 720 Portal Street, Cotati, CA 94931
498 Sapena Ct; Santa Clara, CA 95054

Phone Number: 800.650.4003

Number of Ambulances, Air Rescue, or Air Ambulance Vehicles in fleet: 26

Average number of Ambulances and/or Air Rescue Vehicles/Air Ambulances on duty at 12:00 p.m. (noon) on any given day: 8

Number of Non-Ambulance Medical Transport Litter Vans (gurney van) and/or wheelchair vans: 1

Ambulance Strike Team Participant: Yes No

Number of Helicopters based in this LEMSA's jurisdiction: 0

Written ALS Agreement with LEMSA to Participate in EMS System: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Medical Director: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	System Available 24 Hours: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Level of Service:			
			<input checked="" type="checkbox"/> Transport <input type="checkbox"/> Non-Transport	<input checked="" type="checkbox"/> ALS <input type="checkbox"/> LALS <input checked="" type="checkbox"/> BLS	<input type="checkbox"/> 9-1-1 <input checked="" type="checkbox"/> 7-Digit <input checked="" type="checkbox"/> CCT <input checked="" type="checkbox"/> IFT	<input checked="" type="checkbox"/> Ground <input type="checkbox"/> Air
		<input type="checkbox"/> Non-Ambulance Medical Transport Services		<input type="checkbox"/> Litter/Gurney Van	<input checked="" type="checkbox"/> Wheelchair Van	



TABLE 4: RESPONSE AND TRANSPORTATION

Ownership: <input type="checkbox"/> Public <input checked="" type="checkbox"/> Private	If Public: <input type="checkbox"/> Fire <input type="checkbox"/> Law <input type="checkbox"/> Other _____	If Public: <input type="checkbox"/> City <input type="checkbox"/> County <input type="checkbox"/> State <input type="checkbox"/> Fire District <input type="checkbox"/> Federal	If Air: <input type="checkbox"/> Rotary <input type="checkbox"/> Fixed Wing	Air Classification: <input type="checkbox"/> Auxiliary Rescue <input type="checkbox"/> Air Ambulance <input type="checkbox"/> ALS Rescue <input type="checkbox"/> BLS Rescue
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Provider Resource (cont.)

CEMSIS Provider ID #: S43-50771

Name of ePCR Vendor: ImageTrend

Contract Dates: 07/01/2019 to 06/30/2024

Ground Non-Transporting and/or Transporting Agencies

5,368 Total number of responses
15 Number of emergency responses
5,353 Number of non-emergency responses

Ground Transporting Agencies

5,339 Total number of transports
18 Number of emergency transports
5,321 Number of non-emergency transports

Air Transporting Services

0 Total number of responses
0 Number of emergency responses
0 Number of non-emergency responses

0 Total number of transports
0 Number of emergency transports
0 Number of non-emergency transports

Provider Staff Information

Total number of certified EMTs in the field: 71

Total number of certified Advanced EMTs in the field: 0

Total number of certified/accredited Paramedics in the field: 13



TABLE 4: RESPONSE AND TRANSPORTATION

CY2020

Provider Resource

County: Santa Clara **Provider:** Royal Ambulance **Response Area:** Santa Clara County

Address: 14676 Doolittle Drive; San Leandro, CA 94577
1151 N. 5th Street; San Jose, CA 95112

Phone Number: 510.631.1299

Ambulance Strike Team Participant: Yes No

Number of Ambulances, Air Rescue, or Air Ambulance Vehicles in fleet:	<u>39</u>
Average number of Ambulances and/or Air Rescue Vehicles/Air Ambulances on duty at 12:00 p.m. (noon) on any given day:	<u>20</u>
Number of Non-Ambulance Medical Transport Litter Vans (gurney van) and/or wheelchair vans:	<u>0</u>
Number of Helicopters based in this LEMSA's jurisdiction:	<u>0</u>

<p>Written ALS Agreement with LEMSA to Participate in EMS System:</p> <p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>	<p>Medical Director:</p> <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p>System Available 24 Hours:</p> <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p style="text-align: center;">Level of Service:</p> <table border="0" style="width: 100%;"> <tr> <td><input checked="" type="checkbox"/> Transport</td> <td><input type="checkbox"/> ALS</td> <td><input type="checkbox"/> 9-1-1</td> <td><input checked="" type="checkbox"/> Ground</td> </tr> <tr> <td><input type="checkbox"/> Non-Transport</td> <td><input type="checkbox"/> LALS</td> <td><input checked="" type="checkbox"/> 7-Digit</td> <td><input type="checkbox"/> Air</td> </tr> <tr> <td></td> <td><input checked="" type="checkbox"/> BLS</td> <td><input checked="" type="checkbox"/> CCT</td> <td></td> </tr> <tr> <td></td> <td></td> <td><input checked="" type="checkbox"/> IFT</td> <td></td> </tr> </table> <p>Other Specialty Services (water, snow, etc.): _____</p> <table border="0" style="width: 100%;"> <tr> <td><input type="checkbox"/> Non-Ambulance Medical Transport Services</td> <td><input type="checkbox"/> Litter/Gurney Van</td> <td><input type="checkbox"/> Wheelchair Van</td> </tr> </table>	<input checked="" type="checkbox"/> Transport	<input type="checkbox"/> ALS	<input type="checkbox"/> 9-1-1	<input checked="" type="checkbox"/> Ground	<input type="checkbox"/> Non-Transport	<input type="checkbox"/> LALS	<input checked="" type="checkbox"/> 7-Digit	<input type="checkbox"/> Air		<input checked="" type="checkbox"/> BLS	<input checked="" type="checkbox"/> CCT				<input checked="" type="checkbox"/> IFT		<input type="checkbox"/> Non-Ambulance Medical Transport Services	<input type="checkbox"/> Litter/Gurney Van	<input type="checkbox"/> Wheelchair Van
<input checked="" type="checkbox"/> Transport	<input type="checkbox"/> ALS	<input type="checkbox"/> 9-1-1	<input checked="" type="checkbox"/> Ground																			
<input type="checkbox"/> Non-Transport	<input type="checkbox"/> LALS	<input checked="" type="checkbox"/> 7-Digit	<input type="checkbox"/> Air																			
	<input checked="" type="checkbox"/> BLS	<input checked="" type="checkbox"/> CCT																				
		<input checked="" type="checkbox"/> IFT																				
<input type="checkbox"/> Non-Ambulance Medical Transport Services	<input type="checkbox"/> Litter/Gurney Van	<input type="checkbox"/> Wheelchair Van																				



TABLE 4: RESPONSE AND TRANSPORTATION

Ownership: <input type="checkbox"/> Public <input checked="" type="checkbox"/> Private	If Public: <input type="checkbox"/> Fire <input type="checkbox"/> Law <input type="checkbox"/> Other _____	If Public: <input type="checkbox"/> City <input type="checkbox"/> State <input type="checkbox"/> Federal	<input type="checkbox"/> County <input type="checkbox"/> Fire District	If Air: <input type="checkbox"/> Rotary <input type="checkbox"/> Fixed Wing	Air Classification: <input type="checkbox"/> Auxiliary Rescue <input type="checkbox"/> Air Ambulance <input type="checkbox"/> ALS Rescue <input type="checkbox"/> BLS Rescue
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Provider Resource (cont.)

CEMSIS Provider ID #: S43-50804

Name of ePCR Vendor: Zoll

Contract Dates: 07/01/2019 to 06/30/2024

Ground Non-Transporting and/or Transporting Agencies

22,440 Total number of responses
326 Number of emergency responses
20,944 Number of non-emergency responses

Ground Transporting Agencies

22,440 Total number of transports
326 Number of emergency transports
20,944 Number of non-emergency transports

Air Transporting Services

0 Total number of responses
0 Number of emergency responses
0 Number of non-emergency responses

0 Total number of transports
0 Number of emergency transports
0 Number of non-emergency transports

Provider Staff Information

Total number of certified EMTs in the field: 158
 Total number of certified Advanced EMTs in the field: 0
 Total number of certified/accredited Paramedics in the field: 0

Provider Resource

South Santa Clara County Fire District [provided by CALFIRE]

County: Santa Clara **Provider:** _____ **Response Area:** Santa Clara County

Address: 15670 Monterey Street
Morgan Hill, CA 95037

Number of Ambulances, Air Rescue, or Air Ambulance Vehicles in fleet: _____
0

Phone Number: 408.779.2121

Average number of Ambulances and/or Air Rescue Vehicles/Air Ambulances on duty at 12:00 p.m. (noon) on any given day: _____
0

Number of Non-Ambulance Medical Transport Litter Vans (gurney van) and/or wheelchair vans: _____
0

Ambulance Strike Team Participant: Yes No

Number of Helicopters based in this LEMSA's jurisdiction: _____
0

<p>Written ALS Agreement with LEMSA to Participate in EMS System:</p> <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p>Medical Director:</p> <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p>System Available 24 Hours:</p> <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p>Level of Service:</p> <p> <input type="checkbox"/> Transport <input checked="" type="checkbox"/> ALS <input checked="" type="checkbox"/> 9-1-1 <input checked="" type="checkbox"/> Ground <input checked="" type="checkbox"/> Non-Transport <input type="checkbox"/> LALS <input checked="" type="checkbox"/> 7-Digit <input type="checkbox"/> Air <input checked="" type="checkbox"/> BLS <input type="checkbox"/> CCT <input type="checkbox"/> IFT </p> <p>Other Specialty Services (water, snow, etc.): _____</p> <p> <input type="checkbox"/> Non-Ambulance Medical Transport Services <input type="checkbox"/> Litter/Gurney Van <input type="checkbox"/> Wheelchair Van </p>
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Ownership: <input checked="" type="checkbox"/> Public <input type="checkbox"/> Private	If Public: <input checked="" type="checkbox"/> Fire <input type="checkbox"/> Law <input type="checkbox"/> Other _____	If Public: <input type="checkbox"/> City <input type="checkbox"/> State <input type="checkbox"/> Federal	<input type="checkbox"/> County <input checked="" type="checkbox"/> Fire District	If Air: <input type="checkbox"/> Rotary <input type="checkbox"/> Fixed Wing	Air Classification: <input type="checkbox"/> Auxiliary Rescue <input type="checkbox"/> Air Ambulance <input type="checkbox"/> ALS Rescue <input type="checkbox"/> BLS Rescue
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Provider Resource (cont.)

CEMSIS Provider ID #: S43-51730

Name of ePCR Vendor: ImageTrend

Contract Dates: 07/01/2011 to 06/30/2022

Ground Non-Transporting and/or Transporting Agencies

1,198 Total number of responses
1,198 Number of emergency responses
0 Number of non-emergency responses

Ground Transporting Agencies

0 Total number of transports
0 Number of emergency transports
0 Number of non-emergency transports

Air Transporting Services

0 Total number of responses
0 Number of emergency responses
0 Number of non-emergency responses

0 Total number of transports
0 Number of emergency transports
0 Number of non-emergency transports

Provider Staff Information

Total number of certified EMTs in the field: 17

Total number of certified Advanced EMTs in the field: 0

Total number of certified/accredited Paramedics in the field: 11

Provider Resource

County: Santa Clara **Provider:** CALFIRE-Santa Clara Unit **Response Area:** Santa Clara County

Address: 15670 Monterey Street
Morgan Hill, CA 95037

Phone Number: 408.779.2121

Number of Ambulances, Air Rescue, or Air Ambulance Vehicles in fleet: 1

Average number of Ambulances and/or Air Rescue Vehicles/Air Ambulances on duty at 12:00 p.m. (noon) on any given day: 1

Number of Non-Ambulance Medical Transport Litter Vans (gurney van) and/or wheelchair vans: 0

Ambulance Strike Team Participant: Yes No

Number of Helicopters based in this LEMSA's jurisdiction: 1

<p>Written ALS Agreement with LEMSA to Participate in EMS System:</p> <p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>	<p>Medical Director:</p> <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p>System Available 24 Hours:</p> <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p>Level of Service:</p> <p> <input type="checkbox"/> Transport <input type="checkbox"/> ALS <input checked="" type="checkbox"/> 9-1-1 <input checked="" type="checkbox"/> Ground <input checked="" type="checkbox"/> Non-Transport <input type="checkbox"/> LALS <input checked="" type="checkbox"/> 7-Digit <input checked="" type="checkbox"/> Air <input checked="" type="checkbox"/> BLS <input type="checkbox"/> CCT <input type="checkbox"/> IFT </p> <p>Other Specialty Services (water, snow, etc.): _____</p> <p> <input type="checkbox"/> Non-Ambulance Medical Transport Services <input type="checkbox"/> Litter/Gurney Van <input type="checkbox"/> Wheelchair Van </p>
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Ownership: <input checked="" type="checkbox"/> Public <input type="checkbox"/> Private	If Public: <input checked="" type="checkbox"/> Fire <input type="checkbox"/> Law <input type="checkbox"/> Other _____	If Public: <input type="checkbox"/> City <input checked="" type="checkbox"/> State <input type="checkbox"/> Federal	<input type="checkbox"/> County <input type="checkbox"/> Fire District	If Air: <input checked="" type="checkbox"/> Rotary <input type="checkbox"/> Fixed Wing	Air Classification: <input type="checkbox"/> Auxiliary Rescue <input type="checkbox"/> Air Ambulance <input type="checkbox"/> ALS Rescue <input checked="" type="checkbox"/> BLS Rescue
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Provider Resource (cont.)

CEMSIS Provider ID #: S43-50176

Name of ePCR Vendor: ImageTrend

Contract Dates: N/A; No agreement executed.

Ground Non-Transporting and/or Transporting Agencies

200 Total number of responses
0 Number of emergency responses
0 Number of non-emergency responses

Ground Transporting Agencies

0 Total number of transports
0 Number of emergency transports
0 Number of non-emergency transports

Air Transporting Services

0 Total number of responses
0 Number of emergency responses
0 Number of non-emergency responses

11 Total number of transports
11 Number of emergency transports
0 Number of non-emergency transports

Provider Staff Information

Total number of certified EMTs in the field: 50

Total number of certified Advanced EMTs in the field: 0

Total number of certified/accredited Paramedics in the field: 0

Provider Resource

County: Santa Clara **Provider:** City of San Jose, Fire Department **Response Area:** Santa Clara County

Address: 255 North Montgomery Street
San Jose, CA 95128

Number of Ambulances, Air Rescue, or Air Ambulance Vehicles in fleet: 5

Phone Number: 408.794.7000

Average number of Ambulances and/or Air Rescue Vehicles/Air Ambulances on duty at 12:00 p.m. (noon) on any given day: 3

Number of Non-Ambulance Medical Transport Litter Vans (gurney van) and/or wheelchair vans: 0

Ambulance Strike Team Participant: Yes No

Number of Helicopters based in this LEMSA's jurisdiction: 0

<p>Written ALS Agreement with LEMSA to Participate in EMS System:</p> <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p>Medical Director:</p> <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p>System Available 24 Hours:</p> <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p>Level of Service:</p> <p> <input checked="" type="checkbox"/> Transport <input checked="" type="checkbox"/> ALS <input checked="" type="checkbox"/> 9-1-1 <input checked="" type="checkbox"/> Ground <input checked="" type="checkbox"/> Non-Transport <input type="checkbox"/> LALS <input checked="" type="checkbox"/> 7-Digit <input type="checkbox"/> Air <input checked="" type="checkbox"/> BLS <input type="checkbox"/> CCT <input type="checkbox"/> IFT </p> <p>Other Specialty Services (water, snow, etc.): _____</p> <p> <input type="checkbox"/> Non-Ambulance Medical Transport Services <input type="checkbox"/> Litter/Gurney Van <input type="checkbox"/> Wheelchair Van </p>
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Ownership: <input checked="" type="checkbox"/> Public <input type="checkbox"/> Private	If Public: <input checked="" type="checkbox"/> Fire <input type="checkbox"/> Law <input type="checkbox"/> Other _____	If Public: <input checked="" type="checkbox"/> City <input type="checkbox"/> State <input type="checkbox"/> Federal	<input type="checkbox"/> County <input type="checkbox"/> Fire District	If Air: <input type="checkbox"/> Rotary <input type="checkbox"/> Fixed Wing	Air Classification: <input type="checkbox"/> Auxiliary Rescue <input type="checkbox"/> Air Ambulance <input type="checkbox"/> ALS Rescue <input type="checkbox"/> BLS Rescue
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Provider Resource (cont.)

CEMSIS Provider ID #: S43-50831

Name of ePCR Vendor: ImageTrend

Contract Dates: 07/01/2011 to 06/30/2022

Ground Non-Transporting and/or Transporting Agencies

<u>73,875</u>	Total number of responses
<u>62,532</u>	Number of emergency responses
<u>10,343</u>	Number of non-emergency responses

Ground Transporting Agencies

<u>7</u>	Total number of transports
<u>7</u>	Number of emergency transports
<u>0</u>	Number of non-emergency transports

Air Transporting Services

<u>0</u>	Total number of responses
<u>0</u>	Number of emergency responses
<u>0</u>	Number of non-emergency responses

<u>0</u>	Total number of transports
<u>0</u>	Number of emergency transports
<u>0</u>	Number of non-emergency transports

Provider Staff Information

Total number of certified EMTs in the field: 490

Total number of certified Advanced EMTs in the field: 0

Total number of certified/accredited Paramedics in the field: 154

Provider Resource

County: Santa Clara **Provider:** City of Santa Clara, Fire Department **Response Area:** Santa Clara County

Address: 777 Benton Street
Santa Clara, CA 95050

Number of Ambulances, Air Rescue, or Air Ambulance Vehicles in fleet: 2

Phone Number: 408.615.4900

Average number of Ambulances and/or Air Rescue Vehicles/Air Ambulances on duty at 12:00 p.m. (noon) on any given day: 0

Number of Non-Ambulance Medical Transport Litter Vans (gurney van) and/or wheelchair vans: 0

Ambulance Strike Team Participant: Yes No

Number of Helicopters based in this LEMSA's jurisdiction: 0

<p>Written ALS Agreement with LEMSA to Participate in EMS System:</p> <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p>Medical Director:</p> <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p>System Available 24 Hours:</p> <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p>Level of Service:</p> <p> <input checked="" type="checkbox"/> Transport <input checked="" type="checkbox"/> ALS <input checked="" type="checkbox"/> 9-1-1 <input checked="" type="checkbox"/> Ground <input checked="" type="checkbox"/> Non-Transport <input type="checkbox"/> LALS <input checked="" type="checkbox"/> 7-Digit <input type="checkbox"/> Air <input checked="" type="checkbox"/> BLS <input type="checkbox"/> CCT <input type="checkbox"/> IFT </p> <p>Other Specialty Services (water, snow, etc.): _____</p> <p> <input type="checkbox"/> Non-Ambulance Medical Transport Services <input type="checkbox"/> Litter/Gurney Van <input type="checkbox"/> Wheelchair Van </p>
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Ownership: <input checked="" type="checkbox"/> Public <input type="checkbox"/> Private	If Public: <input checked="" type="checkbox"/> Fire <input type="checkbox"/> Law <input type="checkbox"/> Other _____	If Public: <input checked="" type="checkbox"/> City <input type="checkbox"/> State <input type="checkbox"/> Federal	<input type="checkbox"/> County <input type="checkbox"/> Fire District	If Air: <input type="checkbox"/> Rotary <input type="checkbox"/> Fixed Wing	Air Classification: <input type="checkbox"/> Auxiliary Rescue <input type="checkbox"/> Air Ambulance <input type="checkbox"/> ALS Rescue <input type="checkbox"/> BLS Rescue
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Provider Resource (cont.)

CEMSIS Provider ID #: S43-51115

Name of ePCR Vendor: ImageTrend

Contract Dates: 07/01/2011 to 06/30/2022

Ground Non-Transporting and/or Transporting Agencies

6,169 Total number of responses
4,044 Number of emergency responses
2,088 Number of non-emergency responses

Ground Transporting Agencies

0 Total number of transports
0 Number of emergency transports
0 Number of non-emergency transports

Air Transporting Services

0 Total number of responses
0 Number of emergency responses
0 Number of non-emergency responses

0 Total number of transports
0 Number of emergency transports
0 Number of non-emergency transports

Provider Staff Information

Total number of certified EMTs in the field: 68

Total number of certified Advanced EMTs in the field: 0

Total number of certified/accredited Paramedics in the field: 57

Provider Resource

County: Santa Clara **Provider:** City of Sunnyvale, Department of Public Safety **Response Area:** Santa Clara County

Address: 700 All American Way
Sunnyvale, CA 94088

Phone Number: 408.730.7100

Number of Ambulances, Air Rescue, or Air Ambulance Vehicles in fleet: 0

Average number of Ambulances and/or Air Rescue Vehicles/Air Ambulances on duty at 12:00 p.m. (noon) on any given day: 0

Number of Non-Ambulance Medical Transport Litter Vans (gurney van) and/or wheelchair vans: 0

Ambulance Strike Team Participant: Yes No

Number of Helicopters based in this LEMSA's jurisdiction: 0

<p>Written ALS Agreement with LEMSA to Participate in EMS System:</p> <p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>	<p>Medical Director:</p> <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p>System Available 24 Hours:</p> <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p>Level of Service:</p> <p> <input type="checkbox"/> Transport <input type="checkbox"/> ALS <input checked="" type="checkbox"/> 9-1-1 <input checked="" type="checkbox"/> Ground <input checked="" type="checkbox"/> Non-Transport <input type="checkbox"/> LALS <input checked="" type="checkbox"/> 7-Digit <input type="checkbox"/> Air <input checked="" type="checkbox"/> BLS <input type="checkbox"/> CCT <input type="checkbox"/> IFT </p> <p>Other Specialty Services (water, snow, etc.): _____</p> <p> <input type="checkbox"/> Non-Ambulance Medical Transport Services <input type="checkbox"/> Litter/Gurney Van <input type="checkbox"/> Wheelchair Van </p>
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Ownership: <input checked="" type="checkbox"/> Public <input type="checkbox"/> Private	If Public: <input checked="" type="checkbox"/> Fire <input checked="" type="checkbox"/> Law <input type="checkbox"/> Other _____	If Public: <input checked="" type="checkbox"/> City <input type="checkbox"/> State <input type="checkbox"/> Federal	<input type="checkbox"/> County <input type="checkbox"/> Fire District	If Air: <input type="checkbox"/> Rotary <input type="checkbox"/> Fixed Wing	Air Classification: <input type="checkbox"/> Auxiliary Rescue <input type="checkbox"/> Air Ambulance <input type="checkbox"/> ALS Rescue <input type="checkbox"/> BLS Rescue
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Provider Resource (cont.)

CEMSIS Provider ID #: S43-51117

Name of ePCR Vendor: ImageTrend

Contract Dates: 07/01/2011 to 06/30/2022

Ground Non-Transporting and/or Transporting Agencies

6,785 Total number of responses
5,268 Number of emergency responses
1,517 Number of non-emergency responses

Ground Transporting Agencies

0 Total number of transports
0 Number of emergency transports
0 Number of non-emergency transports

Air Transporting Services

0 Total number of responses
0 Number of emergency responses
0 Number of non-emergency responses

0 Total number of transports
0 Number of emergency transports
0 Number of non-emergency transports

Provider Staff Information

Total number of certified EMTs in the field: 194

Total number of certified Advanced EMTs in the field: 0

Total number of certified/accredited Paramedics in the field: 0

Provider Resource

County: Santa Clara **Provider:** Spring Valley Volunteer Fire Department **Response Area:** Santa Clara County

Address: 4350 Felter Road
Milpitas, CA 95035

Phone Number: 408.228.3997

Number of Ambulances, Air Rescue, or Air Ambulance Vehicles in fleet: 0

Average number of Ambulances and/or Air Rescue Vehicles/Air Ambulances on duty at 12:00 p.m. (noon) on any given day: 0

Number of Non-Ambulance Medical Transport Litter Vans (gurney van) and/or wheelchair vans: 0

Ambulance Strike Team Participant: Yes No

Number of Helicopters based in this LEMSA's jurisdiction: 0

<p>Written ALS Agreement with LEMSA to Participate in EMS System:</p> <p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>	<p>Medical Director:</p> <p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>	<p>System Available 24 Hours:</p> <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p>Level of Service:</p> <p> <input type="checkbox"/> Transport <input type="checkbox"/> ALS <input checked="" type="checkbox"/> 9-1-1 <input checked="" type="checkbox"/> Ground <input checked="" type="checkbox"/> Non-Transport <input type="checkbox"/> LALS <input type="checkbox"/> 7-Digit <input type="checkbox"/> Air <input checked="" type="checkbox"/> BLS <input type="checkbox"/> CCT <input type="checkbox"/> IFT </p> <p>Other Specialty Services (water, snow, etc.): _____</p> <p> <input type="checkbox"/> Non-Ambulance Medical Transport Services <input type="checkbox"/> Litter/Gurney Van <input type="checkbox"/> Wheelchair Van </p>
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Ownership: <input type="checkbox"/> Public <input checked="" type="checkbox"/> Private	If Public: <input type="checkbox"/> Fire <input type="checkbox"/> Law <input type="checkbox"/> Other _____	If Public: <input type="checkbox"/> City <input type="checkbox"/> State <input type="checkbox"/> Federal	<input type="checkbox"/> County <input type="checkbox"/> Fire District	If Air: <input type="checkbox"/> Rotary <input type="checkbox"/> Fixed Wing	Air Classification: <input type="checkbox"/> Auxiliary Rescue <input type="checkbox"/> Air Ambulance <input type="checkbox"/> ALS Rescue <input type="checkbox"/> BLS Rescue
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Provider Resource (cont.)

CEMSIS Provider ID #: N/A

Name of ePCR Vendor: N/A

Contract Dates: N/A

Ground Non-Transporting and/or Transporting Agencies

0 Total number of responses
0 Number of emergency responses
0 Number of non-emergency responses

Ground Transporting Agencies

0 Total number of transports
0 Number of emergency transports
0 Number of non-emergency transports

Air Transporting Services

0 Total number of responses
0 Number of emergency responses
0 Number of non-emergency responses

0 Total number of transports
0 Number of emergency transports
0 Number of non-emergency transports

Provider Staff Information

Total number of certified EMTs in the field: 0

Total number of certified Advanced EMTs in the field: 0

Total number of certified/accredited Paramedics in the field: 0



TABLE 4: RESPONSE AND TRANSPORTATION

CY2020

Provider Resource

County: <u>Santa Clara</u>	Provider: <u>Silicon Valley Ambulance</u>	Response Area: <u>Santa Clara County</u>
Address: <u>181 Martinvale Lane</u> <u>San Jose, CA 95119</u>	Number of Ambulances, Air Rescue, or Air Ambulance Vehicles in fleet:	<u>9</u>
Phone Number: <u>408.225.2262</u>	Average number of Ambulances and/or Air Rescue Vehicles/Air Ambulances on duty at 12:00 p.m. (noon) on any given day:	<u>3</u>
	Number of Non-Ambulance Medical Transport Litter Vans (gurney van) and/or wheelchair vans:	<u>0</u>
Ambulance Strike Team Participant: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Number of Helicopters based in this LEMSA's jurisdiction:	<u>0</u>

Written ALS Agreement with LEMSA to Participate in EMS System: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Medical Director: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	System Available 24 Hours: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Level of Service: <input checked="" type="checkbox"/> Transport <input checked="" type="checkbox"/> ALS <input type="checkbox"/> 9-1-1 <input checked="" type="checkbox"/> Ground <input type="checkbox"/> Non-Transport <input type="checkbox"/> LALS <input checked="" type="checkbox"/> 7-Digit <input type="checkbox"/> Air <input checked="" type="checkbox"/> BLS <input type="checkbox"/> CCT <input checked="" type="checkbox"/> IFT Other Specialty Services (water, snow, etc.): _____ _____ <input type="checkbox"/> Non-Ambulance Medical Transport Services <input type="checkbox"/> Litter/Gurney Van <input type="checkbox"/> Wheelchair Van
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TABLE 4: RESPONSE AND TRANSPORTATION

Ownership: <input type="checkbox"/> Public <input checked="" type="checkbox"/> Private	If Public: <input type="checkbox"/> Fire <input type="checkbox"/> Law <input type="checkbox"/> Other _____	If Public: <input type="checkbox"/> City <input type="checkbox"/> State <input type="checkbox"/> Federal	<input type="checkbox"/> County <input type="checkbox"/> Fire District	If Air: <input type="checkbox"/> Rotary <input type="checkbox"/> Fixed Wing	Air Classification: <input type="checkbox"/> Auxiliary Rescue <input type="checkbox"/> Air Ambulance <input type="checkbox"/> ALS Rescue <input type="checkbox"/> BLS Rescue
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Provider Resource (cont.)

CEMSIS Provider ID #: S43-50876

Name of ePCR Vendor: ImageTrend

Contract Dates: 07/01/2019 to 06/30/2024

Ground Non-Transporting and/or Transporting Agencies

3,850 Total number of responses
84 Number of emergency responses
3,766 Number of non-emergency responses

Ground Transporting Agencies

3,850 Total number of transports
84 Number of emergency transports
3,766 Number of non-emergency transports

Air Transporting Services

0 Total number of responses
0 Number of emergency responses
0 Number of non-emergency responses

0 Total number of transports
0 Number of emergency transports
0 Number of non-emergency transports

Provider Staff Information

Total number of certified EMTs in the field: 27
 Total number of certified Advanced EMTs in the field: 0
 Total number of certified/accredited Paramedics in the field: 5



TABLE 4: RESPONSE AND TRANSPORTATION

CY2020

Provider Resource

County:	<u>Santa Clara</u>	Provider:	<u>United Ambulance</u>	Response Area:	<u>Santa Clara County</u>
Address:	<u>3530 Breakwater Court</u> <u>Hayward, CA 94545</u>	Number of Ambulances, Air Rescue, or Air Ambulance Vehicles in fleet:		<u>3</u>	
Phone Number:	<u>510.671.0031</u>	Average number of Ambulances and/or Air Rescue Vehicles/Air Ambulances on duty at 12:00 p.m. (noon) on any given day:		<u>1</u>	
		Number of Non-Ambulance Medical Transport Litter Vans (gurney van) and/or wheelchair vans:		<u>5</u>	
Ambulance Strike Team Participant:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Number of Helicopters based in this LEMSA's jurisdiction:		<u>0</u>	

Written ALS Agreement with LEMSA to Participate in EMS System: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Medical Director: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	System Available 24 Hours: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Level of Service:			
			<input checked="" type="checkbox"/> Transport <input type="checkbox"/> Non-Transport	<input type="checkbox"/> ALS <input type="checkbox"/> LALS <input checked="" type="checkbox"/> BLS	<input type="checkbox"/> 9-1-1 <input checked="" type="checkbox"/> 7-Digit <input type="checkbox"/> CCT <input checked="" type="checkbox"/> IFT	<input checked="" type="checkbox"/> Ground <input type="checkbox"/> Air
			<input type="checkbox"/> Non-Ambulance Medical Transport Services	<input checked="" type="checkbox"/> Litter/Gurney Van	<input type="checkbox"/> Wheelchair Van	



TABLE 4: RESPONSE AND TRANSPORTATION

Ownership: <input type="checkbox"/> Public <input checked="" type="checkbox"/> Private	If Public: <input type="checkbox"/> Fire <input type="checkbox"/> Law <input type="checkbox"/> Other _____	If Public: <input type="checkbox"/> City <input type="checkbox"/> County <input type="checkbox"/> State <input type="checkbox"/> Fire District <input type="checkbox"/> Federal	If Air: <input type="checkbox"/> Rotary <input type="checkbox"/> Fixed Wing	Air Classification: <input type="checkbox"/> Auxiliary Rescue <input type="checkbox"/> Air Ambulance <input type="checkbox"/> ALS Rescue <input type="checkbox"/> BLS Rescue
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Provider Resource (cont.)

CEMSIS Provider ID #: S43-51939

Name of ePCR Vendor: Zoll

Contract Dates: 07/20/2020 to 06/30/2024

Ground Non-Transporting and/or Transporting Agencies

250 Total number of responses
0 Number of emergency responses
250 Number of non-emergency responses

Ground Transporting Agencies

250 Total number of transports
0 Number of emergency transports
250 Number of non-emergency transports

Air Transporting Services

0 Total number of responses
0 Number of emergency responses
0 Number of non-emergency responses

0 Total number of transports
0 Number of emergency transports
0 Number of non-emergency transports

Provider Staff Information

Total number of certified EMTs in the field: 30
 Total number of certified Advanced EMTs in the field: 0
 Total number of certified/accredited Paramedics in the field: 0



TABLE 4: RESPONSE AND TRANSPORTATION

CY2020

Provider Resource

County: <u>Santa Clara</u>	Provider: <u>Westmed Ambulance Service</u>	Response Area: <u>Santa Clara County</u>
Address: <u>14275 Wicks Blvd.</u> <u>San Leandro, CA 94577</u>	Number of Ambulances, Air Rescue, or Air Ambulance Vehicles in fleet:	<u>28</u>
Phone Number: <u>510.614.1420</u>	Average number of Ambulances and/or Air Rescue Vehicles/Air Ambulances on duty at 12:00 p.m. (noon) on any given day:	<u>10</u>
	Number of Non-Ambulance Medical Transport Litter Vans (gurney van) and/or wheelchair vans:	<u>0</u>
Ambulance Strike Team Participant: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Number of Helicopters based in this LEMSA's jurisdiction:	<u>0</u>

Written ALS Agreement with LEMSA to Participate in EMS System: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Medical Director: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	System Available 24 Hours: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Level of Service: <input checked="" type="checkbox"/> Transport <input checked="" type="checkbox"/> ALS <input type="checkbox"/> 9-1-1 <input checked="" type="checkbox"/> Ground <input type="checkbox"/> Non-Transport <input type="checkbox"/> LALS <input checked="" type="checkbox"/> 7-Digit <input type="checkbox"/> Air <input checked="" type="checkbox"/> BLS <input checked="" type="checkbox"/> CCT <input checked="" type="checkbox"/> IFT Other Specialty Services (water, snow, etc.): _____ _____ <input type="checkbox"/> Non-Ambulance Medical Transport Services <input type="checkbox"/> Litter/Gurney Van <input type="checkbox"/> Wheelchair Van
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TABLE 4: RESPONSE AND TRANSPORTATION

Ownership: <input type="checkbox"/> Public <input checked="" type="checkbox"/> Private	If Public: <input type="checkbox"/> Fire <input type="checkbox"/> Law <input type="checkbox"/> Other _____	If Public: <input type="checkbox"/> City <input type="checkbox"/> State <input type="checkbox"/> Federal	<input type="checkbox"/> County <input type="checkbox"/> Fire District	If Air: <input type="checkbox"/> Rotary <input type="checkbox"/> Fixed Wing	Air Classification: <input type="checkbox"/> Auxiliary Rescue <input type="checkbox"/> Air Ambulance <input type="checkbox"/> ALS Rescue <input type="checkbox"/> BLS Rescue
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Provider Resource (cont.)

CEMSIS Provider ID #: S43-50876

Name of ePCR Vendor: Zoll

Contract Dates: 07/01/2019 to 06/30/2024

Ground Non-Transporting and/or Transporting Agencies

15,808 Total number of responses
2,810 Number of emergency responses
12,998 Number of non-emergency responses

Ground Transporting Agencies

15,808 Total number of transports
2,810 Number of emergency transports
12,998 Number of non-emergency transports

Air Transporting Services

0 Total number of responses
0 Number of emergency responses
0 Number of non-emergency responses

0 Total number of transports
0 Number of emergency transports
0 Number of non-emergency transports

Provider Staff Information

Total number of certified EMTs in the field: 65

Total number of certified Advanced EMTs in the field: 0

Total number of certified/accredited Paramedics in the field: 5

Provider Resource

Rural/Metro of California, Inc; subsidiary of AMR/Global Medical Response

County: Santa Clara **Provider:** _____ **Response Area:** Santa Clara County

Address: 1345 Vander Way
San Jose, CA 95112

Number of Ambulances, Air Rescue, or Air Ambulance Vehicles in fleet: _____ 63

Phone Number: 408.645.7345

Average number of Ambulances and/or Air Rescue Vehicles/Air Ambulances on duty at 12:00 p.m. (noon) on any given day: _____ 36

Number of Non-Ambulance Medical Transport Litter Vans (gurney van) and/or wheelchair vans: _____ 0

Ambulance Strike Team Participant: Yes No

Number of Helicopters based in this LEMSA's jurisdiction: _____ 0

<p>Written ALS Agreement with LEMSA to Participate in EMS System:</p> <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p>Medical Director:</p> <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p>System Available 24 Hours:</p> <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p>Level of Service:</p> <p><input checked="" type="checkbox"/> Transport <input checked="" type="checkbox"/> ALS <input checked="" type="checkbox"/> 9-1-1 <input checked="" type="checkbox"/> Ground <input checked="" type="checkbox"/> Non-Transport <input type="checkbox"/> LALS <input checked="" type="checkbox"/> 7-Digit <input type="checkbox"/> Air <input checked="" type="checkbox"/> BLS <input type="checkbox"/> CCT <input type="checkbox"/> IFT</p> <p>Other Specialty Services (water, snow, etc.): _____</p> <p><input type="checkbox"/> Non-Ambulance Medical Transport Services <input type="checkbox"/> Litter/Gurney Van <input type="checkbox"/> Wheelchair Van</p>
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Ownership: <input type="checkbox"/> Public <input checked="" type="checkbox"/> Private	If Public: <input type="checkbox"/> Fire <input type="checkbox"/> Law <input type="checkbox"/> Other _____	If Public: <input type="checkbox"/> City <input type="checkbox"/> State <input type="checkbox"/> Federal	<input type="checkbox"/> County <input type="checkbox"/> Fire District	If Air: <input type="checkbox"/> Rotary <input type="checkbox"/> Fixed Wing	Air Classification: <input type="checkbox"/> Auxiliary Rescue <input type="checkbox"/> Air Ambulance <input type="checkbox"/> ALS Rescue <input type="checkbox"/> BLS Rescue
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Provider Resource (cont.)

CEMSIS Provider ID #: S43-50808

Name of ePCR Vendor: ImageTrend

Contract Dates: 07/01/2011 to 06/30/2022

Ground Non-Transporting and/or Transporting Agencies

<u>117,227</u>	Total number of responses
<u>85,832</u>	Number of emergency responses
<u>31,395</u>	Number of non-emergency responses

Ground Transporting Agencies

<u>79,064</u>	Total number of transports
<u>8,610</u>	Number of emergency transports
<u>70,454</u>	Number of non-emergency transports

Air Transporting Services

<u>0</u>	Total number of responses
<u>0</u>	Number of emergency responses
<u>0</u>	Number of non-emergency responses

<u>0</u>	Total number of transports
<u>0</u>	Number of emergency transports
<u>0</u>	Number of non-emergency transports

Provider Staff Information

Total number of certified EMTs in the field: 172

Total number of certified Advanced EMTs in the field: 0

Total number of certified/accredited Paramedics in the field: 185

TABLE 5:

ASSESSMENT OF HOSPITALS & CRITICAL CARE CENTERS

County: Santa Clara

Reporting Year: CY 2020

EMS Agency Facility Details

Are there established guidelines, developed in partnership with acute care hospital administrators, physicians, and nurses, that identify patients who should be considered for transfer to facilities of higher capability? Yes No

Is there collaboration with acute care hospital administrators, physicians, and nurses to establish transfer agreements for patients who should be considered for transfer to facilities of higher capability? Yes No

Is there a process to ensure that all base hospital personnel who provide medical direction to prehospital personnel are knowledgeable about LEMSA policies and procedures and have training in radio communications techniques? Yes No

Is there a process to ensure that all alternative base station personnel who provide medical direction to prehospital personnel are knowledgeable about the EMS Agency's policies and procedures? Yes No

a) Do the base station personnel have training in radio communications? Yes No

EMS Agency Facility Statistics

Emergency Departments

Total number of emergency departments: 11

Total number of comprehensive emergency services: 1

Total number of basic emergency services: 10

Total number of standby emergency services: 0

Hospitals with Written Agreements

Total number of receiving hospitals: 10

Total number of base hospitals: 1

Alternative Receiving Facilities

Do you have designated alternative receiving facilities? Yes No

Number of alternate receiving facilities:

Psychiatric: 1 Sobering Centers: 1 Rural Area 0

Specialty Care System

Do you have a trauma system? Yes No

Do you have a ST-Elevation Myocardial Infarction (STEMI) system? Yes No

EMS Agency Facility Statistics (cont.)

Do you have a stroke system? Yes No

Do you have an EMS for children system? Yes No

EMS Agency Specialty Care System Capabilities

Number of *trauma* centers:

Level I 2 Level II 1 Level III 0 Level IV 0

Number of pediatric trauma centers:

Level I 1 Level II 1

Number of EMS patients meeting trauma triage criteria:

1,713

a) Transported to a trauma center by ambulance:

1,697

b) Not transported to a trauma center:

 16

Number of trauma patients transferred to a trauma center for a higher level of care:

 909

a) From a non-trauma facility:

 777

b) From a lower level trauma center:

 132

Number of *STEMI* centers/hospitals designated by EMS Agency:

 8

Receiving: 8 Referring: 0

Number of *stroke* centers/hospitals (third party accreditation only):

Comprehensive: 3 Thrombectomy Capable: 1

Primary: 10 Acute Stroke Ready: 0

Number of *pediatric* receiving centers:

Comprehensive: 0 General: 0 Advanced: 0 Basic: 11

Provider Resource

County: Santa Clara

Facility: El Camino Hospital - Mountain View
(Designated within EMS Agency's Jurisdiction)

Address: 2500 Grant Road
Mountain View, CA 94040

Phone No.: 650.940.7385

Contracts with Facilities in Neighboring Jurisdictions:

Written Contract: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Service:		Base Hospital: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Receiving Hospital: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Burn Center: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
	<input type="checkbox"/> Referral Emergency <input checked="" type="checkbox"/> Basic Emergency	<input type="checkbox"/> Standby Emergency <input type="checkbox"/> Comprehensive Emergency			

Specialty Care System					
Trauma Center:	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Adult:	<input type="checkbox"/> I <input type="checkbox"/> II <input type="checkbox"/> III <input type="checkbox"/> IV	Pediatrics:	<input type="checkbox"/> I <input type="checkbox"/> II
STEMI Center:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Service:	<input checked="" type="checkbox"/> Receiving Center	<input type="checkbox"/> Referring Hospital	
Stroke Center:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Service:	<input type="checkbox"/> Comprehensive <input checked="" type="checkbox"/> Primary	<input checked="" type="checkbox"/> Thrombectomy Capable <input type="checkbox"/> Acute Stroke Ready	
Pediatric Receiving Center:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Level:	<input type="checkbox"/> Comprehensive <input type="checkbox"/> General <input type="checkbox"/> Advanced	<input checked="" type="checkbox"/> Basic	
Pediatric Critical Care Center:	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Emerg. Depts. Approved for Pediatrics:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Pediatric Intensive Care Unit:	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

Provider Resource

County: Santa Clara

Facility: Good Samaritan Hospital
(Designated within EMS Agency's Jurisdiction)

Address: 2425 Samaritan Drive
San Jose, CA 95124

Phone No.: 408.559.2011

Contracts with Facilities in Neighboring Jurisdictions:

Written Contract: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Service:		Base Hospital: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Receiving Hospital: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Burn Center: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
	<input type="checkbox"/> Referral Emergency <input checked="" type="checkbox"/> Basic Emergency	<input type="checkbox"/> Standby Emergency <input type="checkbox"/> Comprehensive Emergency			

Specialty Care System					
Trauma Center:	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Adult:	<input type="checkbox"/> I <input type="checkbox"/> II <input type="checkbox"/> III <input type="checkbox"/> IV	Pediatrics:	<input type="checkbox"/> I <input type="checkbox"/> II
STEMI Center:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Service:	<input checked="" type="checkbox"/> Receiving Center	<input type="checkbox"/> Referring Hospital	
Stroke Center:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Service:	<input checked="" type="checkbox"/> Comprehensive <input checked="" type="checkbox"/> Primary	<input type="checkbox"/> Thrombectomy Capable <input type="checkbox"/> Acute Stroke Ready	
Pediatric Receiving Center:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Level:	<input type="checkbox"/> Comprehensive <input type="checkbox"/> General <input type="checkbox"/> Advanced	<input checked="" type="checkbox"/> Basic	
Pediatric Critical Care Center:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Emerg. Depts. Approved for Pediatrics:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Pediatric Intensive Care Unit:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

Provider Resource

County: Santa Clara

Facility: Kasier Santa Clara
(Designated within EMS Agency's Jurisdiction)

Address: 700 Lawrence Expressway
Santa Clara, CA 95051

Phone No.: 408.851.5460

Contracts with Facilities in Neighboring Jurisdictions:

Written Contract: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Service:		Base Hospital: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Receiving Hospital: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Burn Center: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
	<input type="checkbox"/> Referral Emergency <input checked="" type="checkbox"/> Basic Emergency	<input type="checkbox"/> Standby Emergency <input type="checkbox"/> Comprehensive Emergency			

Specialty Care System					
Trauma Center:	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Adult:	<input type="checkbox"/> I <input type="checkbox"/> II <input type="checkbox"/> III <input type="checkbox"/> IV	Pediatrics:	<input type="checkbox"/> I <input type="checkbox"/> II
STEMI Center:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Service:	<input checked="" type="checkbox"/> Receiving Center	<input type="checkbox"/> Referring Hospital	
Stroke Center:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Service:	<input type="checkbox"/> Comprehensive <input checked="" type="checkbox"/> Primary	<input type="checkbox"/> Thrombectomy Capable <input type="checkbox"/> Acute Stroke Ready	
Pediatric Receiving Center:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Level:	<input type="checkbox"/> Comprehensive <input type="checkbox"/> General <input type="checkbox"/> Advanced	<input checked="" type="checkbox"/> Basic	
Pediatric Critical Care Center:	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Emerg. Depts. Approved for Pediatrics:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Pediatric Intensive Care Unit:	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

Provider Resource

County: Santa Clara

Facility: El Camino Hospital - Los Gatos
(Designated within EMS Agency's Jurisdiction)

Address: 815 Pollard Road
Los Gatos, CA 95032

Phone No.: 408.866.4040

Contracts with Facilities in Neighboring Jurisdictions:

Written Contract: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Service:		Base Hospital: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Receiving Hospital: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Burn Center: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
	<input type="checkbox"/> Referral Emergency <input checked="" type="checkbox"/> Basic Emergency	<input type="checkbox"/> Standby Emergency <input type="checkbox"/> Comprehensive Emergency			

Specialty Care System						
Trauma Center:	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	Adult:	<input type="checkbox"/> I	<input type="checkbox"/> II	<input type="checkbox"/> III <input type="checkbox"/> IV
			Pediatrics:	<input type="checkbox"/> I	<input type="checkbox"/> II	
STEMI Center:	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	Service:	<input type="checkbox"/> Receiving Center	<input type="checkbox"/> Referring Hospital	
Stroke Center:	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	Service:	<input type="checkbox"/> Comprehensive <input checked="" type="checkbox"/> Primary	<input type="checkbox"/> Thrombectomy Capable <input type="checkbox"/> Acute Stroke Ready	
Pediatric Receiving Center:	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	Level:	<input type="checkbox"/> Comprehensive	<input type="checkbox"/> General	<input type="checkbox"/> Advanced <input checked="" type="checkbox"/> Basic
Pediatric Critical Care Center:	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	Emerg. Depts. Approved for Pediatrics:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		Pediatric Intensive Care Unit: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

Provider Resource

County: Santa Clara

Facility: Lucille Packard Childrens Hospital
(Designated within EMS Agency's Jurisdiction)

Address: 725 Welch Road
Palo Alto, CA 94304

Phone No.: 650.723.0592

Contracts with Facilities in Neighboring Jurisdictions:

Written Contract: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Service:		Base Hospital: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Receiving Hospital: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Burn Center: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
	<input type="checkbox"/> Referral Emergency <input type="checkbox"/> Basic Emergency	<input type="checkbox"/> Standby Emergency <input type="checkbox"/> Comprehensive Emergency			

Specialty Care System					
Trauma Center:	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Adult:	<input type="checkbox"/> I <input type="checkbox"/> II <input type="checkbox"/> III <input type="checkbox"/> IV	Pediatrics:	<input type="checkbox"/> I <input type="checkbox"/> II
STEMI Center:	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Service:	<input type="checkbox"/> Receiving Center	<input type="checkbox"/> Referring Hospital	
Stroke Center:	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Service:	<input type="checkbox"/> Comprehensive <input type="checkbox"/> Primary	<input type="checkbox"/> Thrombectomy Capable <input type="checkbox"/> Acute Stroke Ready	
Pediatric Receiving Center:	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Level:	<input type="checkbox"/> Comprehensive	<input type="checkbox"/> General	<input type="checkbox"/> Advanced <input type="checkbox"/> Basic
Pediatric Critical Care Center:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Emerg. Depts. Approved for Pediatrics:	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Pediatric Intensive Care Unit: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

Provider Resource

County: Santa Clara

Facility: O'Connor Hospital
(Designated within EMS Agency's Jurisdiction)

Address: 2105 Forest Avenue
San Jose, CA 95128

Phone No.: 408.947.3999

Contracts with Facilities in Neighboring Jurisdictions:

Written Contract: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Service:		Base Hospital: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Receiving Hospital: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Burn Center: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
	<input type="checkbox"/> Referral Emergency <input checked="" type="checkbox"/> Basic Emergency	<input type="checkbox"/> Standby Emergency <input type="checkbox"/> Comprehensive Emergency			

Specialty Care System					
Trauma Center:	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Adult:	<input type="checkbox"/> I <input type="checkbox"/> II <input type="checkbox"/> III <input type="checkbox"/> IV	Pediatrics:	<input type="checkbox"/> I <input type="checkbox"/> II
STEMI Center:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Service:	<input checked="" type="checkbox"/> Receiving Center	<input type="checkbox"/> Referring Hospital	
Stroke Center:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Service:	<input type="checkbox"/> Comprehensive <input checked="" type="checkbox"/> Primary	<input type="checkbox"/> Thrombectomy Capable <input type="checkbox"/> Acute Stroke Ready	
Pediatric Receiving Center:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Level:	<input type="checkbox"/> Comprehensive <input type="checkbox"/> General <input type="checkbox"/> Advanced	<input checked="" type="checkbox"/> Basic	
Pediatric Critical Care Center:	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Emerg. Depts. Approved for Pediatrics:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Pediatric Intensive Care Unit:	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

Provider Resource

County: Santa Clara

Facility: Palo Alto Veterans Administration Hospital
(Designated within EMS Agency's Jurisdiction)

Address: 3801 Miranda Avenue
Palo Alto, CA 94304

Phone No.: 650.849.0221

Contracts with Facilities in Neighboring Jurisdictions:

Written Contract: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Service:		Base Hospital: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Receiving Hospital: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Burn Center: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
	<input type="checkbox"/> Referral Emergency <input checked="" type="checkbox"/> Basic Emergency	<input type="checkbox"/> Standby Emergency <input type="checkbox"/> Comprehensive Emergency			

Specialty Care System					
Trauma Center:	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Adult:	<input type="checkbox"/> I <input type="checkbox"/> II <input type="checkbox"/> III <input type="checkbox"/> IV	Pediatrics:	<input type="checkbox"/> I <input type="checkbox"/> II
STEMI Center:	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Service:	<input type="checkbox"/> Receiving Center	<input type="checkbox"/> Referring Hospital	
Stroke Center:	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Service:	<input type="checkbox"/> Comprehensive <input type="checkbox"/> Primary	<input type="checkbox"/> Thrombectomy Capable <input type="checkbox"/> Acute Stroke Ready	
Pediatric Receiving Center:	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Level:	<input type="checkbox"/> Comprehensive	<input type="checkbox"/> General	<input type="checkbox"/> Advanced <input type="checkbox"/> Basic
Pediatric Critical Care Center:	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Emerg. Depts. Approved for Pediatrics:	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Pediatric Intensive Care Unit: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

Provider Resource

County: Santa Clara

Facility: Regional Medical Center of San Jose
(Designated within EMS Agency's Jurisdiction)

Address: 225 North Jackson Avenue
San Jose, CA 95116

Phone No.: 408.259.5000

Contracts with Facilities in Neighboring Jurisdictions:

Written Contract: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Service:		Base Hospital: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Receiving Hospital: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Burn Center: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
	<input type="checkbox"/> Referral Emergency <input checked="" type="checkbox"/> Basic Emergency	<input type="checkbox"/> Standby Emergency <input type="checkbox"/> Comprehensive Emergency			

Specialty Care System						
Trauma Center:	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	Adult:	<input type="checkbox"/> I	<input checked="" type="checkbox"/> II	<input type="checkbox"/> III <input type="checkbox"/> IV
			Pediatrics:	<input type="checkbox"/> I	<input type="checkbox"/> II	
STEMI Center:	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	Service:	<input checked="" type="checkbox"/> Receiving Center	<input type="checkbox"/> Referring Hospital	
Stroke Center:	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	Service:	<input checked="" type="checkbox"/> Comprehensive <input checked="" type="checkbox"/> Primary	<input type="checkbox"/> Thrombectomy Capable <input type="checkbox"/> Acute Stroke Ready	
Pediatric Receiving Center:	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	Level:	<input type="checkbox"/> Comprehensive	<input type="checkbox"/> General	<input type="checkbox"/> Advanced <input checked="" type="checkbox"/> Basic
Pediatric Critical Care Center:	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	Emerg. Depts. Approved for Pediatrics:	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	Pediatric Intensive Care Unit: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

Provider Resource

County: Santa Clara

Facility: Saint Louise Regional Hospital
(Designated within EMS Agency's Jurisdiction)

Address: 9400 No Name Uno
Gilroy, CA 95020

Phone No.: 408.848.8680

Contracts with Facilities in Neighboring Jurisdictions:

Written Contract: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Service:		Base Hospital: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Receiving Hospital: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Burn Center: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
	<input type="checkbox"/> Referral Emergency <input checked="" type="checkbox"/> Basic Emergency	<input type="checkbox"/> Standby Emergency <input type="checkbox"/> Comprehensive Emergency			

Specialty Care System					
Trauma Center:	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Adult:	<input type="checkbox"/> I <input type="checkbox"/> II <input type="checkbox"/> III <input type="checkbox"/> IV	Pediatrics:	<input type="checkbox"/> I <input type="checkbox"/> II
STEMI Center:	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Service:	<input type="checkbox"/> Receiving Center	<input type="checkbox"/> Referring Hospital	
Stroke Center:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Service:	<input type="checkbox"/> Comprehensive <input checked="" type="checkbox"/> Primary	<input type="checkbox"/> Thrombectomy Capable <input type="checkbox"/> Acute Stroke Ready	
Pediatric Receiving Center:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Level:	<input type="checkbox"/> Comprehensive <input type="checkbox"/> General <input type="checkbox"/> Advanced	<input checked="" type="checkbox"/> Basic	
Pediatric Critical Care Center:	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Emerg. Depts. Approved for Pediatrics:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Pediatric Intensive Care Unit:	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

Provider Resource

County: Santa Clara

Facility: Kasier San Jose
(Designated within EMS Agency's Jurisdiction)

Address: 250 Hospital Parkway
San Jose, CA 95119

Phone No.: 408.972.7634

Contracts with Facilities in Neighboring Jurisdictions:

Written Contract: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Service:		Base Hospital: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Receiving Hospital: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Burn Center: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
	<input type="checkbox"/> Referral Emergency <input checked="" type="checkbox"/> Basic Emergency	<input type="checkbox"/> Standby Emergency <input type="checkbox"/> Comprehensive Emergency			

Specialty Care System						
Trauma Center:	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	Adult:	<input type="checkbox"/> I	<input type="checkbox"/> II	<input type="checkbox"/> III <input type="checkbox"/> IV
			Pediatrics:	<input type="checkbox"/> I	<input type="checkbox"/> II	
STEMI Center:	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	Service:	<input checked="" type="checkbox"/> Receiving Center	<input type="checkbox"/> Referring Hospital	
Stroke Center:	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	Service:	<input type="checkbox"/> Comprehensive <input checked="" type="checkbox"/> Primary	<input type="checkbox"/> Thrombectomy Capable <input type="checkbox"/> Acute Stroke Ready	
Pediatric Receiving Center:	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	Level:	<input type="checkbox"/> Comprehensive	<input type="checkbox"/> General	<input type="checkbox"/> Advanced <input checked="" type="checkbox"/> Basic
Pediatric Critical Care Center:	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	Emerg. Depts. Approved for Pediatrics:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		Pediatric Intensive Care Unit: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

Provider Resource

County: Santa Clara

Facility: Stanford Medical Center
(Designated within EMS Agency's Jurisdiction)

Address: 300 Pastuer Drive
Stanford, CA 94305

Phone No.: 650.723.7337

Contracts with Facilities in Neighboring Jurisdictions:

Written Contract: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Service:		Base Hospital: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Receiving Hospital: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Burn Center: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
	<input type="checkbox"/> Referral Emergency <input checked="" type="checkbox"/> Basic Emergency	<input type="checkbox"/> Standby Emergency <input type="checkbox"/> Comprehensive Emergency			

Specialty Care System						
Trauma Center:	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	Adult:	<input checked="" type="checkbox"/> I	<input type="checkbox"/> II	<input type="checkbox"/> III <input type="checkbox"/> IV
			Pediatrics:	<input checked="" type="checkbox"/> I	<input type="checkbox"/> II	
STEMI Center:	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	Service:	<input checked="" type="checkbox"/> Receiving Center	<input type="checkbox"/> Referring Hospital	
Stroke Center:	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	Service:	<input checked="" type="checkbox"/> Comprehensive <input checked="" type="checkbox"/> Primary	<input type="checkbox"/> Thrombectomy Capable <input type="checkbox"/> Acute Stroke Ready	
Pediatric Receiving Center:	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	Level:	<input type="checkbox"/> Comprehensive	<input type="checkbox"/> General	<input type="checkbox"/> Advanced <input checked="" type="checkbox"/> Basic
Pediatric Critical Care Center:	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	Emerg. Depts. Approved for Pediatrics:	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	
					Pediatric Intensive Care Unit:	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

Provider Resource

County: Santa Clara

Facility: Santa Clara Valley Medical Center
(Designated within EMS Agency's Jurisdiction)

Address: 751 South Bascom Avenue
San Jose, CA 95128

Phone No.: 408.885.6912

Contracts with Facilities in Neighboring Jurisdictions:

Written Contract: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Service:		Base Hospital: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Receiving Hospital: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Burn Center: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
	<input type="checkbox"/> Referral Emergency <input checked="" type="checkbox"/> Basic Emergency	<input type="checkbox"/> Standby Emergency <input checked="" type="checkbox"/> Comprehensive Emergency			

Specialty Care System					
Trauma Center:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Adult:	<input checked="" type="checkbox"/> I <input type="checkbox"/> II <input type="checkbox"/> III <input type="checkbox"/> IV	Pediatrics:	<input type="checkbox"/> I <input checked="" type="checkbox"/> II
STEMI Center:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Service:	<input checked="" type="checkbox"/> Receiving Center	<input type="checkbox"/> Referring Hospital	
Stroke Center:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Service:	<input type="checkbox"/> Comprehensive <input checked="" type="checkbox"/> Primary	<input type="checkbox"/> Thrombectomy Capable <input type="checkbox"/> Acute Stroke Ready	
Pediatric Receiving Center:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Level:	<input type="checkbox"/> Comprehensive <input type="checkbox"/> General <input type="checkbox"/> Advanced	<input checked="" type="checkbox"/> Basic	
Pediatric Critical Care Center:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Emerg. Depts. Approved for Pediatrics:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Pediatric Intensive Care Unit:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

TABLE 6:
PUBLIC INFORMATION AND EDUCATION

County: Santa Clara

Reporting Year: CY 2020

Public Information, Education, and Awareness

Number of programs EMS Agency provided to the public:

<u>0</u> EMS Awareness	<u>0</u> Bleeding Control
<u>0</u> First Aid	<u>0</u> CPR
<u>0</u> Prevention Activities	<u>0</u> Disaster Preparedness

Injury & Illness Prevention

Number of programs EMS Agency provided to the public:

<u>0</u> Alcohol & Substance Abuse	<u>0</u> General Injury
<u>0</u> Asthma Control	<u>0</u> Home Safety
<u>0</u> Bicycle Safety	<u>0</u> Infant Safe Sleep Practices
<u>0</u> Burn Prevention	<u>0</u> Mental Health
<u>0</u> Child Passenger Safety	<u>0</u> Obesity
<u>0</u> Childhood Immunizations	<u>0</u> Pedestrian Safety
<u>0</u> Diabetes	<u>0</u> POLST/End of Life Care
<u>0</u> Distracted Driving	<u>0</u> Poison Control & Prevention
<u>0</u> Dog Bite Prevention	<u>0</u> Product Safety & Recalls
<u>0</u> Elderly Falls	<u>0</u> Suicide Prevention
<u>0</u> Firearm Safety	<u>0</u> Water Safety
<u>0</u> General Health	<u>0</u> Youth Violence Prevention

TABLE 7:
DISASTER MEDICAL RESPONSE

County: Santa Clara

Reporting Year: CY 2020

EMS Agency Structure

Are you part of a multicounty EMS system for disaster response? Yes No

Are you a separate department or agency? Yes No

a) To whom do you report? County of Santa Clara Health System; Chief Executive Officer

If your agency is not within the health department, do you have a plan to coordinate public health and environmental health issues with the health department? Yes No

What healthcare coalitions are you participating in? Santa Clara County Hospitals Emergency Preparedness Partnership;

a) How often do you meet with your healthcare coalitions? Monthly

Do you have connection with your local Disaster Healthcare Volunteer Administrators in your jurisdiction? Yes No

List all neighboring counties which you have written cooperative agreements and/or medical mutual aid/assistance agreements with: N/A

EMS Agency Plans, Policies, Programs, and Teams

Do you have the following:

- a) Disaster Plan? Yes No URL Link: <https://www/sccgov.org/sites/ems/Documents/pcm800/811MCI.pdf> No
- b) Active Shooter Policy? Yes No URL Link: <https://www/sccgov.org/sites/ems/Documents/pcm600/Policy610.pdf> No
- c) Hazardous Material (Hazmat) Plan? Yes No URL Link: <https://www/sccgov.org/sites/ems/Documents/pcm800/811AppendixA.pdf> No
- d) Disaster Medical Cache? Yes No URL Link: N/A No
- e) Disaster Medical Support Group? Yes No URL Link: N/A No
- f) Medical Assets? Yes No URL Link: N/A No
- g) Incident Command Organization Chart? Yes No URL Link: <https://www/sccgov.org/sites/ems/Documents/pcm800/818.pdf> No
- h) Communications Plan? Yes No URL Link: <https://www/sccgov.org/sites/ems/Documents/pcm800/818.pdf> No
- i) Ambulance Strike Team Leader Program? Yes No
- j) EMS Authority Affiliated Strike Teams (includes a Disaster Medical Support Unit)? Yes No

Identify the provider: Santa Clara County EMS Agency & Rural/Metro of California, Inc; subsidiary of AMR/GMR

EMS Agency System Operations and Resources

Do you have designated field treatment sites? Yes No

a) Identify the locations: As needed, adjacent to incident locations

b) How are they staffed? Public safety personnel and/or medical volunteers

c) Is there a supply system for supporting them for 72 hours? Yes No

Is there a mental/behavioral health program available for responders within your jurisdiction? Yes No

a) Identify the program: _____

Is there a team medical response capability? Yes No

a) For each team, are they incorporated into the local response plan? Yes No

b) Are they available for statewide response? Yes No

c) Are they part of a formal out-of-state response system? Yes No

Are there HazMat trained medical response teams? Yes No

a) At what HazMat level are they trained? FRO

b) Is there capability to do decontamination in an emergency room? Yes No

c) Is there capability to do decontamination in the field? Yes No

Identify who the Medical Health Operational Area Coordinator is:

- Health Officer EMS Agency Jointly Appointed

Do you have specific training for mass casualty incident policies? Yes No

Are you using the Standardized Emergency Management System (SEMS)? Yes No

a) Does it incorporate a form of Incident Command System (ICS) structure? Yes No

Are you integrated in the Medical/Health Branch of the Operation Section in each operational area Emergency Operations Center within your jurisdiction? Yes No

Have you tested your multicasualty incident plan this year? Yes No

a) Was it a real event? Yes

b) Was it an exercise? No

Do you have formal agreements with the following in your operational area to participate in disaster planning and response:

a) Hospitals? Yes No

b) Community Clinics? Yes No

County of Santa Clara Emergency Medical Services System



Emergency Medical Services Agency
700 Empey Way
San Jose, CA 95126
408.794.0600 voice | www.sccemsagency.org
www.facebook.com/SantaClaraCountyEMS

February 28, 2022

Elizabeth Basnett
Assistant Director
California Emergency Medical Services Authority
10901 Gold Center Drive, Suite 400
Rancho Cordova, California 95670

Dear Ms. Basnett,

Santa Clara County Emergency Medical Services has completed an update to the local Trauma Plan. The summarized system activity and changes are enclosed for your review within the 2020 Trauma Plan System Status Report.

Thank you in advance for your review of this Plan. Please do not hesitate to contact Lisa Vajgrt-Smith, Specialty Programs Nurse Coordinator at 408-794-0628 or lisa.vajgrt-smith@ems.sccgov.org with any questions.

.

Sincerely,

A handwritten signature in blue ink that reads "Jackie Lowther RN".

Jackie Lowther, RN, MSN, MBA
Director, Emergency Medical Services

Enclosure

cc: Rene Santiago, Deputy County Executive
Ken Miller, MD., EMS Medical Director
Louis J. Bruhnke, Chief Deputy Director
Tom McGinnis, Systems Division Chief
Elizabeth Winward, Trauma System Coordinator



Santa Clara County Trauma Plan 2020

I. Trauma System Summary:

The Santa Clara County (SCC) trauma system is an inclusive trauma system that allows all medical resources available in the County to work together in providing the best possible outcome for the trauma patient. The field trauma triage criterion identifies "Major Trauma Victims" and allows for patients to be directly triaged to the closest, most appropriate Trauma Center. That terminology will be changing soon, however, in favor of "trauma patient" or "trauma alert." Non-trauma centers work closely with the Trauma Centers to stabilize and transfer walk-in patients and those who have a delayed presentation of traumatic injury. The identified catchment areas for trauma patients are based on geographic considerations as well as other factors affecting access (i.e., traffic conditions, diversion, etc.). By system design, trauma patients with major injuries are transported from the field directly to the trauma center that affords them the shortest time to definitive care.

Santa Clara County's geography varies from sea level areas to mountainous terrain. There are many areas of the county that are undeveloped, while the northern portion is largely developed and heavily populated. The county contains recreational areas, national forests and monuments, lakes, and rugged mountain ranges. The County has designed the trauma system so that there is continuous dialogue with providers of pre-hospital care and hospitals in the rural areas, to assure that residents receive the appropriate level of services for trauma and other emergency care.

The trauma system is one component of the SCC Emergency Medical Services System. The various individuals and committees listed in the organizational structure of the trauma plan serve vital roles in facilitating the effective operation of the Santa Clara County trauma system. In operation since 1986, the system has three designated Trauma Centers that provide services for a population of approximately 1.9 million, and an additional regional population of

approximately 1 million residents in the adjoining counties of San Mateo, Santa Cruz, San Benito, and Monterey. The ability of the SCC trauma system to provide trauma services to adjoining counties has been successful due to the regional trauma system approach and the collaboration of all LEMSAs involved.

The trauma system functions through collaboration with countywide and regional care providers in the pre-hospital, hospital, and rehabilitation phases of care. The Santa Clara Emergency Medical Services (EMS) Agency is the “Local EMS Agency (LEMSA)” referenced in California Code of Regulations, Title 22, Division 9, Chapter 7, and vested with authority for planning, implementing, managing, and evaluating the Santa Clara County Trauma System. The Santa Clara County EMS Medical Director is responsible for medical control of the trauma system. The EMS Director is responsible for oversight and all administrative issues relative to the trauma system. The Specialty Programs Nurse Manager is responsible for the day-to-day oversight and monitoring of the trauma system.

The Trauma Care System Quality Improvement Committee (TCSQIC), a collaborative group of regional medical providers and EMS Agency staff. This committee serves as an advisory body to the EMS Medical Director for the administration of the system-wide quality improvement program and monitoring of the trauma centers performance improvement activities. The trauma system is integrated into the EMS system and benefits from its networks of providers and committees that assure system coordination and accountability.

Each designated trauma center appoints a trauma medical director and a trauma program manager who oversee the function of their respective trauma services. The Trauma Director must be a Board-certified surgeon with experience in trauma care and trained in Advanced Trauma Life support (ATLS). The Trauma Program Manager is a registered nurse who has specialized trauma/critical care training. These individuals provide the daily administrative and clinical oversight for their trauma center. The director and program manager serve as liaisons between the trauma center and the regional trauma care system. Each trauma

center must have an internal structure capable of addressing the needs of the trauma program, while recognizing the multidisciplinary nature of trauma care.

Two of the three trauma centers, Santa Clara Valley Medical Center and Regional Medical Center, are in the metropolitan area of San Jose and receive most of their trauma patients from the central area and the southern portions of Santa Clara County, and transfers from Santa Cruz, San Benito, and Monterey counties. Persons injured in the northern segment of the County are generally transferred to Stanford Health Care, which is in the northwestern sector of the County. This trauma center also serves as a trauma resource for San Mateo County and northern Santa Cruz County.

II. Changes in the Trauma System

1. No significant changes occurred during CY2020.

III. Number and Designation Level of Trauma Centers

Trauma Center	Level	Patient population
Santa Clara Valley Medical Center	I	Adult
	II	Pediatric
Regional Medical Center of San Jose	II	Adult
Stanford Health Care	I	Adult
	I	Pediatric

IV. Trauma System Goals and Objectives

	Jan	Feb	March	April	May	June	July	August	Sept	Oct	Nov	Dec
Objective 1: Collect, validate, and research trauma data for area to improve or enhance the system of care provide to our trauma patients.												
Ensure all trauma data meets and exceeds SCC and NTDS data standards by ensuring compliance with data dictionaries updates. Data audit is completed annually by April.												
Continue validation programs and correct any identified errors with the trauma data before submission to the EMS Agency, CEMSIS, and NTDS. Data is to be collected and submitted to the State on a quarterly ongoing basis.	Submit CEMSIS Data			Submit CEMSIS Data			Submit CEMSIS Data			Submit CEMSIS Data		
Utilize trauma data reports to identify trends of injuries, areas of improvement, and benchmarking to enhance the care provided to trauma patients and to direct injury prevention activities. Annual Trauma Summary completed by September each year. (updated)												
The SCC EMS Agency encourages participation from the coroner's office. Their attendance at meetings has increased. The committee evaluates trauma deaths and the number of autopsies performed has increased (on-going) (updated)												

<p>Non-Trauma Center receiving facilities have all entered into agreements with SCC EMS Agency. Data requirements are included in those agreements. Data reports are sporadic, and work continues to standardize the process.</p>													
<p>Continue to support all local Trauma Centers in the participation of the American College of Surgeons TQIP program. Explore options to participate in "system" TQIP activities. The SCC Trauma System is planning to participate in the State collaborative. Cost continues to be issue, but we are hopeful that funding may be allocated. <i>(ongoing)</i></p>													
<p>Objective 2: Increase trauma primary prevention activities.</p>													
<p>Participate in primary injury prevention activities. <i>(ongoing)</i></p>													
<p>Encourage an environment where all EMS providers contribute to community injury prevention activities. <i>(ongoing)</i></p>													
<p>Objective 3: Participate in the development of the California State Trauma Plan and the Bay Area RTCC.</p>													
<p>Encourage system participants to be involved in the development of the State Trauma Planning activities and to attend annual trauma summits. <i>(ongoing)</i></p>													

SCC stakeholders continue to actively participate and attend RTCC committee meetings, activities, and educational programs.													
Participate on the RTCC re-triage subcommittee to develop a mechanism to collect and analyze re-triage data. The RTCC has decided to continue to collect this data on an ongoing basis. <i>(ongoing)</i>													
Objective 4: Evaluate trauma care policies and procedures to ensure processes are current and quality care is provided.													
The SCC EMS Agency was contacted by a local facility for consideration to become a level III Trauma Center. No immediate need was identified, but this matter is still ongoing.													
Continue to evaluate local policies and procedures with current standards of care to ensure policies remain up to date. <i>(ongoing)</i>	<i>Policy Drafts</i>				<i>Public Comment Period</i>					<i>System Training</i>			
	<i>Final Policy effective</i>												
The SCC EMS Agency is participating on the Trauma Regulations Work Group as the Urban EMSAAC appointee. <i>(ongoing)</i>													
Objective 5: Coordinate Performance Improvement Program activities with system participants.													
Provide staff to organize and support various quality committees and encourage participation from system constituents. <i>(ongoing)</i>													

Continue to evaluate care provided to trauma population through the various quality care committees, such as Pre-hospital Quality Improvement Committees, Trauma Care System Quality Improvement Committees, Regional Trauma Coordinating Committee, etc.	TCSQIC RTCC	Prehospital QI	TCSQIC	RTCC, Prehospital QI	TCSQIC	Prehospital QI	TCSQIC RTCC	Prehospital QI	TCSQIC	RTCC, Prehospital QI	TCSQIC	Prehospital QI
Evaluate system performance indicators on annual basis to assess, track and trend different aspects of trauma care. To be completed annually in October. (ongoing)												
Trauma Centers will maintain ACS verifications and Title 22 designation requirements. They will participate and pass site surveys every two to three years. (updated)												
Objective 6: Promote Public Awareness and information regarding trauma Services and injury prevention												
The EMS Agency, Trauma Centers, and County stakeholders have developed and implemented an elderly fall public awareness campaign. The Trauma Summary reports continue to see these numbers increasing. This correlates to population data seen within the county. Efforts will continue to decrease these numbers. (ongoing) (updated)												

V. Changes to Implementation Schedule

The SCC Trauma System has been in operation since 1986. All aspects are implemented. All current system goals and objectives are noted within Section IV.

VI. Progress on Addressing EMS Authority Trauma System Plan Comments:

The SCC EMS Agency Trauma Plan update that was sent in 2020 was accepted by the EMS Authority without the need to address any issues.

County of Santa Clara Emergency Medical Services System

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February 28, 2022

Elizabeth Basnett
Assistant Director
California Emergency Medical Services Authority
10901 Gold Center Drive, Suite 400
Rancho Cordova, California 95670

Dear Ms. Basnett,

Attached please find the 2020 Santa Clara County EMS STEMI Critical Care Plan. This Plan depicts the collaborative STEMI System of Care that began in 2008. The Board of Supervisors agreed that a Comprehensive Cardiac Care System, integrating pre-hospital care and transport with hospital interventions, would have significant benefit in terms of mortality and morbidity for patients who are experiencing a STEMI. The STEMI task force focused on the recommendations for STEMI Receiving Center designation, prehospital triage, and 12-lead EKG acquisition and transmission to the hospital. Eight hospitals were identified as having both an interest and capability to provide these services on a 24/7 basis.

The EMS Agency and prehospital providers had already been making improvements in cardiac care during the previous four years (2004) including revising pre-hospital treatment protocols and upgrading field equipment and training all Santa Clara County paramedics would be able to obtain 12-lead electrocardiograms (EKGs) and identify STEMI patients.

The current STEMI of Care system, part of the Santa Clara County EMS system, is comprised of eight (8) STEMI receiving centers each capable of diagnostic and interventional techniques to restore blood flow to coronary arteries. The prehospital component of the STEMI system includes the acquisition of a 12-lead ECG, interpretation of that ECG, the decision to transport a STEMI patient to a STEMI center, including bypassing of a closer non-STEMI center emergency department, and the early notification of that center. Aspirin, nitroglycerin, and analgesia are provided to patients with cardiac-associated chest pain with or without the finding of STEMI on the 12-lead ECG.

Important metrics to monitor the time-sensitive performance of a STEMI system include the EMS patient contact-to-ECG interval in the field and the door-to-intervention interval once the patient arrives at the STEMI center. The STEMI center intervention can be either intravenous thrombolysis or intra-coronary clot lysis, clot removal and the placement of a stent at the site of the clot. Current practice based upon patient outcomes favors intra-coronary interventions and are measured as a 'door-to-balloon' interval (D2B), referring to the balloon at the end of the intra-coronary catheter used to open the vessel and restore blood flow.

Thank you in advance for your review of this Plan. Please do not hesitate to contact Lisa Vajgrt-Smith, Specialty Programs Nurse Coordinator at 408-794-0628 lisa.vajgrt-smith@ems.sccgov.org with any questions.

Respectfully,

A handwritten signature in blue ink that reads "Jackie M. Lowther RN". The signature is written in a cursive style.

Jackie Lowther RN, MSN, MBA
Director, Emergency Medical Services

Enclosure

cc: Rene Santiago, Deputy County Executive
Ken Miller, MD., EMS Medical Director
Louis J. Bruhnke, Chief Deputy Director
Tom McGinnis, Systems Division Chief
Farid Nasr, MD, Specialty Care System



Santa Clara County

STEMI Plan

2020

**This plan was prepared for the
California Emergency Medical Services Authority
November 5, 2021**

Plan prepared by:

County of Santa Clara
Emergency Medical Services Agency
700 Empey Way
Santa Clara, CA. 995128
(408)0600

Plan reviewed and edited by:

Ken Miller, MD
Jackie Lowther RN, EMS Director
John Sampson, EMS Specialist

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Executive Summary

California statute mandates the Emergency Medical Services Authority (EMSA) to adopt necessary regulations to carry out the coordination and integration of all state activities concerning Emergency Medical Services (EMS) (Health and Safety Code §1797.107).

In addition, State statute allows the EMS Authority to establish guidelines for hospital facilities, in cooperation with affected medical organizations, according to critical care capabilities (Health and Safety Code §1798.150).

As a result of these statutes, the EMS Authority established a multidisciplinary ST-Elevation Myocardial Infarction (STEMI) Care Committee for the development of STEMI System of Care Regulations for California.¹

California's Statewide STEMI Critical Care System is described in the California Code of Regulations; Title 22, Division 9, Chapter 7.1. These regulations outline the requirements of all components of the STEMI Critical Care System including the Local EMS Agency, pre-hospital providers, and hospitals.

Because data management, quality improvement and the evaluation process all have a vital role in providing high quality care to the cardiac patient; these items have also been identified in the regulations. The overall goal of the regulations is to reduce morbidity and mortality from acute heart disease by improving the delivery of emergency medical care within the communities of California.

The Santa Clara County Emergency Medical Services Agency (SCCEMSA) has been involved with the regulation development process alongside state and hospital system representatives. Santa Clara County already has many of the regulations in place, including pre-hospital care policies to identify STEMI patients, designated STEMI receiving hospitals, and destination policies.

As a requirement of the California Regulations, this document is to serve as a formal written plan for the SCCEMSA STEMI Critical Care System.

Santa Clara County Emergency Medical Services Agency's STEMI Critical Care System Plan has been written in accordance with Title 22, Division 9, Chapter 7.1 of the California Code of Regulations.

¹ <https://emsa.ca.gov/stemi/>

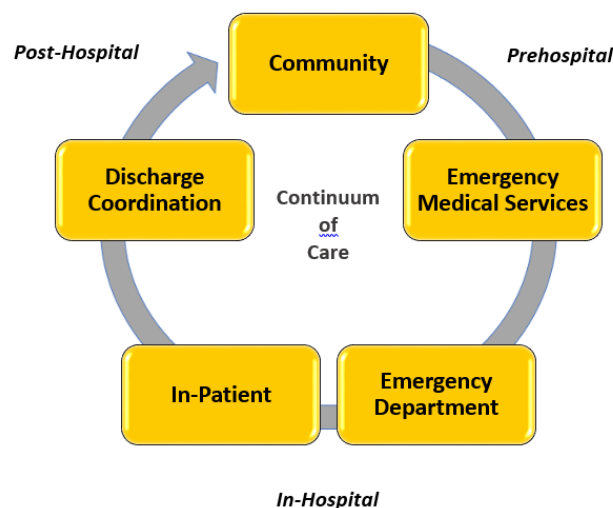
STEMI Critical Care System

About 610,000 people die of heart disease in the United States every year. Heart disease is the leading cause of death for both men and women. Coronary heart disease (CHD) is the most common type of heart disease, killing over 370,000 people annually. Every year approximately 735,000 adult Americans have a heart attack. Of these cases, 525,000 are a first-time heart attack and the other 210,000 happen to people who have already had a first-time heart attack.² A heart attack, also known as Myocardial Infarction (MI), is a life-changing event that places heavy burden on patients, families, and caregivers. When a patient is suffering from a cardiac event, timely intervention is critical to reverse the damage; reduce mortality, morbidity, and disability in addition to improving survivor quality of life.

Although many EMS agencies in California have developed STEMI systems of care, there have been no standardized statewide requirements for the development and implementation of a STEMI critical care system until now.

The broad objective for a California STEMI Critical Care System is to improve the care of patients suffering from a life-threatening acute heart attack. More specifically, standardized statewide requirements will lead to the consistent application of standardized care, thus protecting the health and safety of the public.³

Santa Clara County's STEMI Critical Care System is a subspecialty care component of the EMS system that was developed by SCCEMSA. This critical care system links pre-hospital and hospital care to deliver treatment to STEMI patients who potentially require immediate medical or surgical intervention.



² <https://www.cdc.gov/heartdisease/facts.htm>

³ https://ems.ca.gov/wp-content/uploads/sites/47/2018/04/STEMI_ISOR.pdf

STEMI Continuum of Care

Rapid coronary artery reperfusion is the foundation of treatment for acute ST-Elevation myocardial infarction (STEMI) to improve survival. Despite two decades of evidence and seven years since best practice guidelines were introduced, 30-50% of patients fail to have these guidelines applied to their care. Considering the number of Percutaneous Coronary Intervention (PCI)-capable hospitals increased by almost 50% and that 90% of Americans live within 60 minutes of a PCI-capable facility, inadequate access cannot entirely explain these systematic failures. The challenge lies within a highly fragmented health system comprising of approximately 4,750 acute care hospitals and more than 15,000 emergency medical service (EMS) agencies in the United States. The challenge is further exacerbated by structural barriers that hinder coordination between EMS providers and hospitals. Such fragmentation has hindered the development of coordinated treatment plans along and throughout the continuum of care.⁴

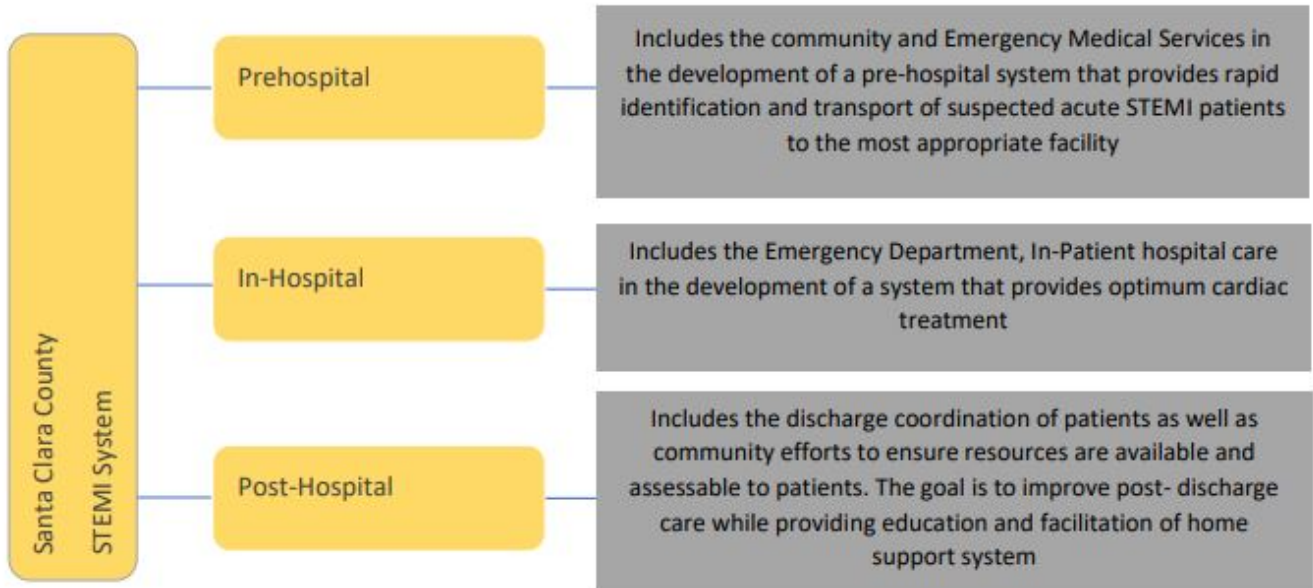
Improved adherence to the American College of Cardiology and American Heart Association (ACC/AHA) heart failure guidelines translates to improved clinical outcomes in real world heart failure patients. Data shows that with each 10% improvement in ACC/AHA guideline-recommended care there was an associated 13% lower odds of 24-month mortality.⁵ STEMI systems of care improve care and support for cardiac patients throughout their health care journey from Pre-hospital care to In-Hospital care throughout Post-Hospital care. This collaboration and standardization across the continuum of care is paramount to improve outcomes.

The continuum of care is important to caregivers and patients alike. It leads to an improvement of patient satisfaction levels, reduces costs, and improves health. Keeping up the continuum of care is especially significant for specific patient populations such as those patients who are more dependent on the health services, elderly patients, patients suffering from complex medical conditions, mentally vulnerable patients and patients with chronic diseases. Due to the aforementioned examples, continuum of care is particularly beneficial to the cardiac patient population. STEMI systems of care depend on robust collaboration to ensure that the continuum of care is optimally exercised.

⁴ <http://circ.ahajournals.org/content/134/5/365>

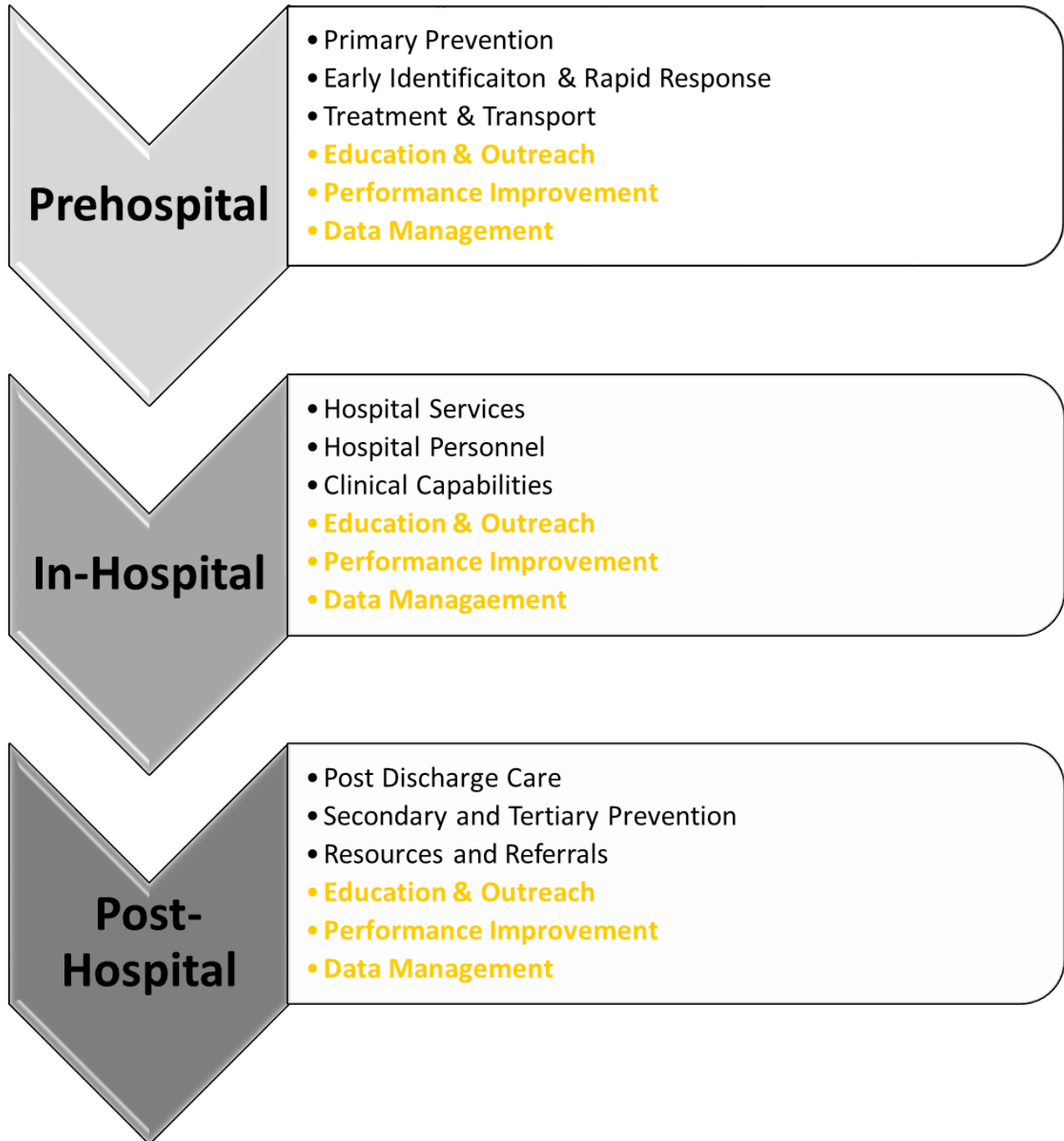
⁵ https://www.ehdc.org/sites/default/files/resources/files/transitions%20of%20care_Pina_10.17.17.pdf

The Santa Clara County STEMI continuum of care can be broken down and evaluated at three levels:



Goals Within the Continuum of Care

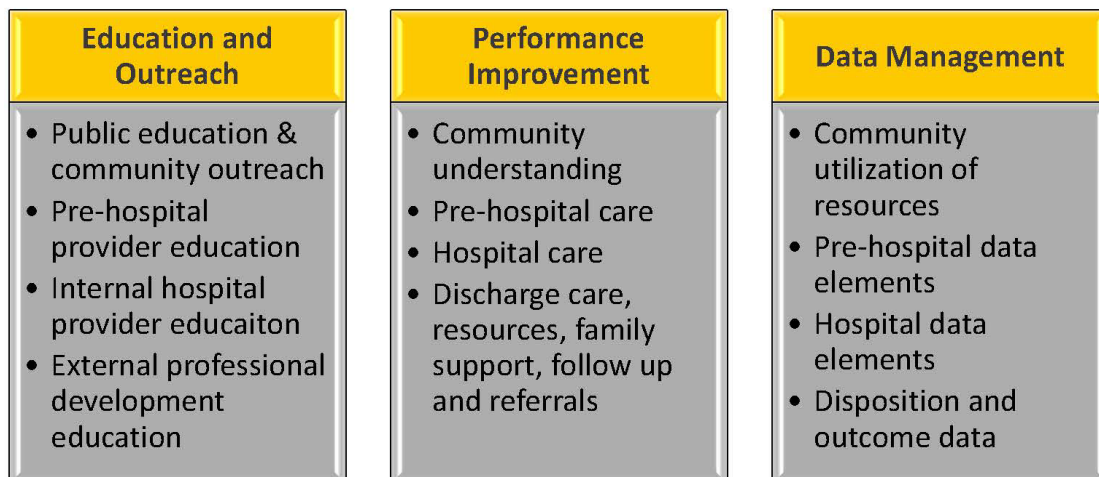
Within each level of the continuum of care, there are identified goals designed to build safety into the STEMI system of care, ensuring that patients receive the safest and most reliable care across the continuum.



Three Areas of Collaboration: A Team Approach

Recognizing that patient outcomes are greatly dependent on the quality of care within each level of care on the continuum, it is critical for Santa Clara County providers to work in collaboration with a team approach wherever possible. Common themes span across the Pre-hospital, In-Hospital and Post-Hospital levels that identify opportunities to maximize SCCEMSA's team approach to care of the cardiac patient.

- Education of the community, EMS and other healthcare professionals promote and support an integrated system of care. Interprofessional and interdisciplinary education systems prepare care providers to work collaboratively together as a team. When combined with community education and outreach efforts, the patients have an active role in their personal health and well-being.
- Performance Improvement invariably involves work across multiple systems and disciplines within a practice. Within the healthcare practice continuum, this is particularly applicable as patients have various formal and informal care providers throughout their course of illness and into their discharge disposition.
- Good data can help identify, verify, and proactively address issues, measure progress and capitalize on opportunities. When data is gathered, tracked, and analyzed in a credible way over time, it becomes possible to measure progress and success. Policies, procedures, services, and interventions can then be evaluated, modified, and improved.



A team approach from a truly integrated healthcare system will go beyond education, outreach, performance improvement and data management/sharing. SCCEMSA's aim is to create a seamless system which requires EMS professionals and community partners to commit to the same shared objectives and find ways to achieve them together. This team approach from a people-centered EMS system takes advantages of the strengths and resources brought by each organization and provider to protect the health and wellness of individuals and communities.

Stakeholders

Santa Clara County EMS Agency

Serving 1,936,259 people, the Santa Clara EMS Agency works diligently to ensure that the communities, which are spread over its approximate 1,132 square-miles, have access to emergency cardiac treatment and services that provide quality care based off best practices and evidence-based research.

SCCEMSA's specialty care programs are further refined by the agency's commitment to excellence as defined in the Vision, Mission, and Values

Vision

Assuring an EMS system in Santa Clara County that provides safe, quality, and effective pre-hospital care.

Mission Statement

The Santa Clara County Emergency Medical Services Agency is an essential service dedicated to ensuring the provision of quality patient care to the people of Santa Clara County through collaboration, facilitated regulation, and system management.

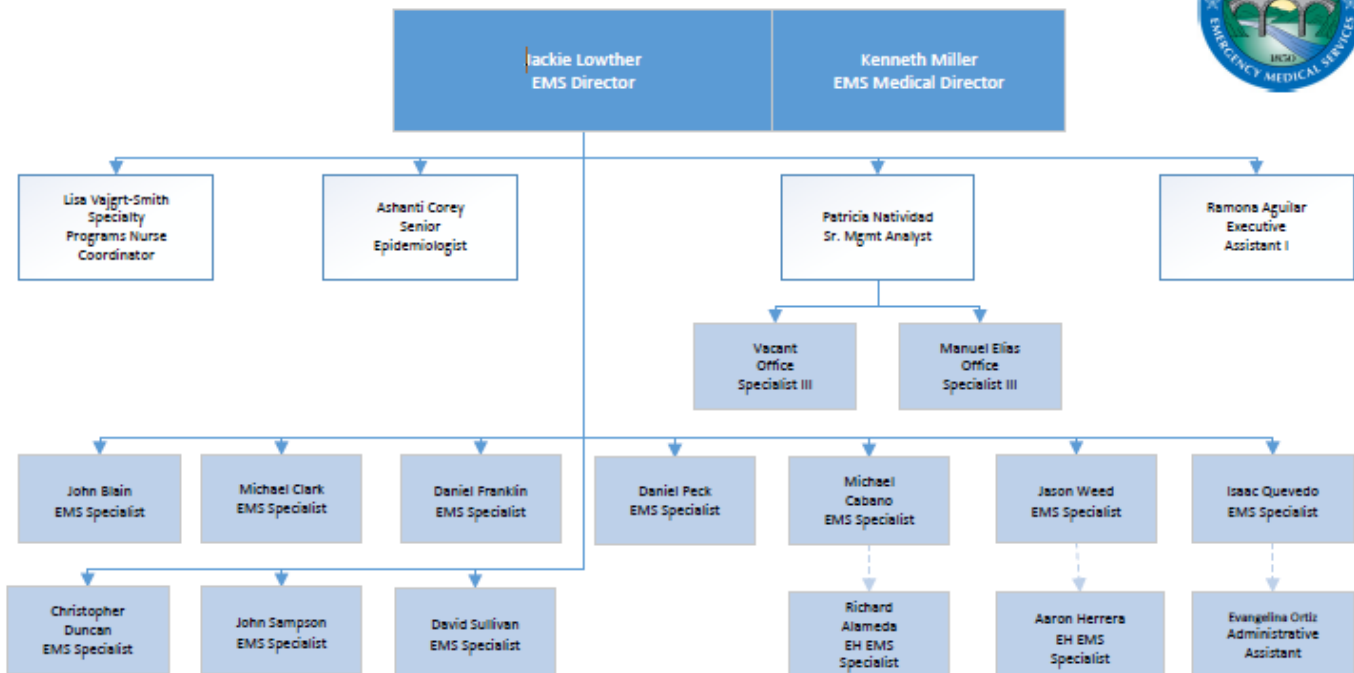
Values

- **Dignity and Respect:** We treat people with dignity and respect.
- **Progressive Innovation:** We are dedicated to the continuous improvement of our processes and systems, based on science, data, and best practices.
- **Professionalism and Objectivity:** We treat all individuals and organizations professionally, fairly, and without prejudice.
- **Leadership:** We lead through collaboration and facilitation to ensure accountability, the provision of quality patient care, while ensuring fiscal and operational stability.
- **Participation:** We value the contributions of the public, other agencies, and organizations in the development, implementation, and evaluation of the Santa Clara County EMS System.

The Santa Clara County Emergency Medical Services Agency is comprised of an EMS Director, EMS Medical Director, Specialty Programs Nurse Coordinator, ten EMS Specialists, one Senior Epidemiologist, one Senior Management Analyst, one Executive Assistant, one Administrative Assistant, two Office Specialists III's and two Extra Help EMS Specialists. Although each staff member has a different role in the STEMI Critical Care System, it is through the work that is managed collectively as a group that the STEMI System exhibits optimal performance.

Santa Clara County EMS Agency Organization Chart

Emergency Medical Services (EMS) Agency Organizational Chart



Santa Clara County STEMI Receiving Centers

Santa Clara County has a total of ten (10) pre-hospital receiving hospitals.

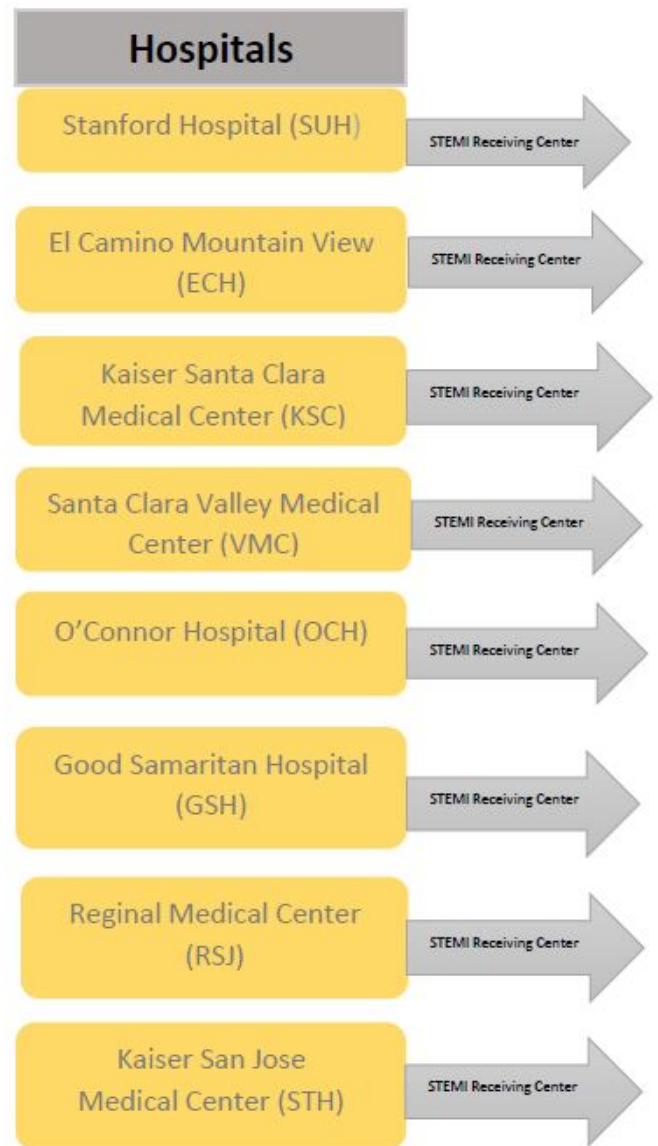
Eight of the ten receiving hospitals are currently designated by the Santa Clara County EMS Agency as a STEMI Receiving Center.

The California State Regulations define a STEMI Receiving Center (SRC) as a “licensed general acute care facility that meets the minimum hospital STEMI care requirements pursuant to *Section §100270.124* of the California Code of Regulations and is able to perform Percutaneous Coronary Intervention (PCI).”

Santa Clara County Emergency Medical Services Agency has written agreements with hospitals that are designated STEMI receiving centers. To be considered for STEMI receiving center designation, the hospital must hold current Chest Pain Certification by The Joint Commission and will need to complete SCCEMSA STEMI Center Designation Application packet beginning December 1, 2021. The application packet will contain an evaluation tool that SCCEMSA will use to ensure that the facility meets the requirements to receive STEMI Center Designation.

STEMI Centers must also maintain compliance with Santa Clara County EMS Agency designation criteria outlined in Policy document #410 – *STEMI Receiving Center Designation*.

SCCEMSA STEMI Center Designation Application Packet will be available in January 2021. Survey’s will begin in the Spring of 2022.



Santa Clara County

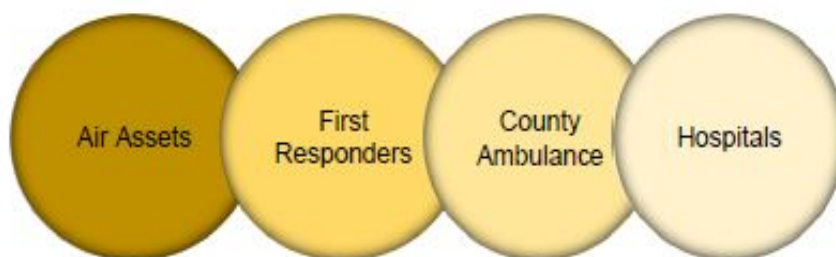
Pre-hospital Providers

The County of Santa Clara currently has a non-exclusive EMS Advanced Life Support (ALS) First Response and Advanced Life Support Emergency Ambulance Services. The county has a contract with Rural/Metro of California providing 911 transport services. A combination of ground, air and specialty CCT transport are all offered within the county. The community can access emergency services through the 9-1-1 system.

Once on scene, the first responder and ambulance transport crews coordinate their efforts to rapidly identify, treat and transport STEMI patients to a STEMI Receiving Center. A critical component in the continuum of care is the transfer of 12-Lead ECG findings. Providers electronically transmit a 12-Lead ECG to the receiving hospital and when needed, pre-hospital providers can contact base hospital personnel for direction. Field crews notify the STEMI Receiving Center of the incoming patient with a “*STEMI Alert*” radio report in order to allow hospital staff to prepare for expeditious triage and treatment upon patient arrival.

Pre-hospital providers work closely with the hospital staff to ensure that all pertinent information is relayed for a seamless transition within the continuum of care.

Santa Clara County EMS Agency has a policy in place to describe the process in which 12-Lead ECG transmission takes place. Policy document #700-M09; serves as an advanced life support skill guideline for obtaining, utilizing, and transmitting 12-Lead ECG’s.



The ACS /STEMI Patient

Santa Clara County Emergency Medical Services Agency believes that rapid identification, treatment, and transport of STEMI patients by emergency medical personnel is a valuable part of optimal care for the victims of cardiac emergencies. Morbidity and mortality rates in STEMI patients have been shown to be directly related to the degree of myocardial damage sustained as a result of vessel occlusion. An important determinant of outcomes for the STEMI patient is timely reperfusion of the coronary arteries. Reperfusion of the affected artery can salvage myocardium that would otherwise become necrotic.

A STEMI diagnosis is based on electrocardiographic changes that show evidence of evolving myocardial injury, as well as the presentation of the patient. When there are electrocardiographic changes and the patient presents with pain or symptoms of suspected cardiac origin, the patient goes directly to the cardiac catheterization laboratory for a possible reperfusion treatment. Therefore, STEMI patients benefit the most from rapid coronary reperfusion therapy.⁶

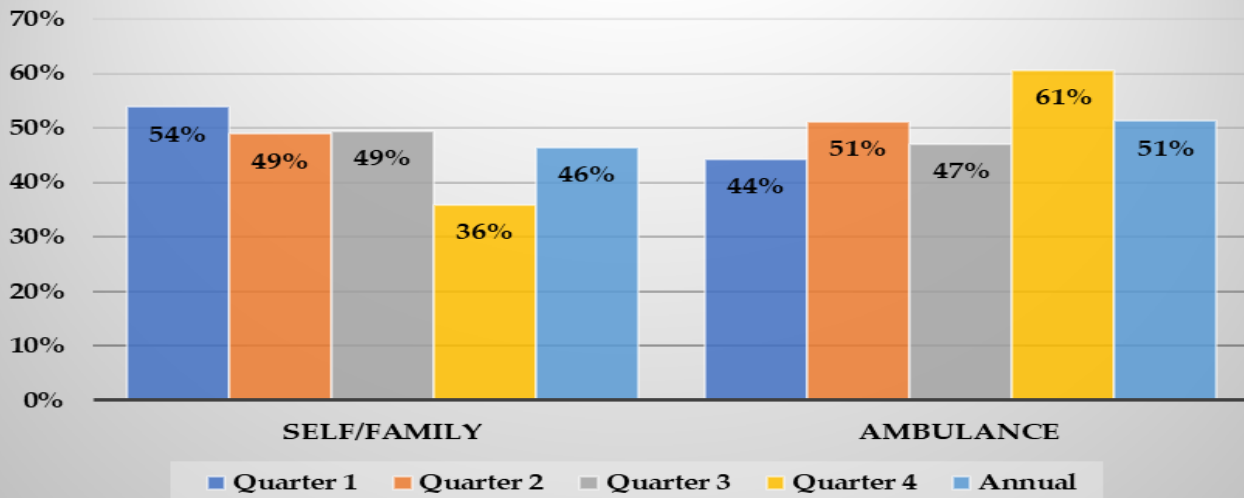
It is imperative that field personnel are well trained and STEMI receiving centers are well prepared for the patient that presents with ST Elevation. Santa Clara County EMS Agency has a policy in place to assist field providers in the rapid identification of a patient who may be suffering an ST Elevation MI. Policy document # 700-A08 Chest Pain – Suspected Cardiac Ischemia; describes signs and symptoms of a suspected STEMI patient and is a protocol for treatment in Santa Clara County.

The pre-hospital component of the STEMI system includes the acquisition of a 12-lead ECG, interpretation of that ECG, the decision to transport a STEMI patient to a STEMI center, including bypassing of a closer non-STEMI center emergency department, and the early notification of that center. Aspirin, nitroglycerin, and analgesia are provided to patients with cardiac-associated chest pain with or without the finding of STEMI on the 12-lead ECG.

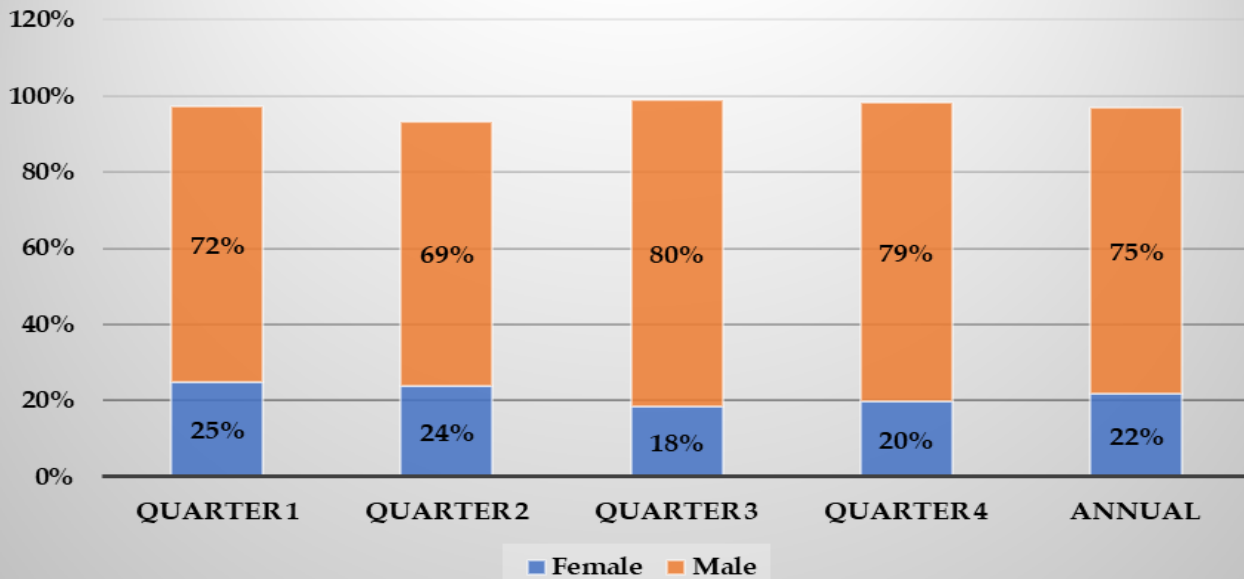
The American Heart Association recommends a Door to Balloon (D2B) interval of 90 minutes upon arrival at the ED or a STEMI center. To achieve these timeframes, there needs to be close coordination between the EMS system and the STEMI receiving center. Like stroke, the preferred method of arrival to a hospital for STEMI is via ambulance. Throughout 2020, the method of arrival for STEMI patients was almost evenly split between private vehicle and ambulance.

⁶ https://www.heart.org/idc/groups/heart-public/@wcm/@mwa/documents/downloadable/ucm_487492.pdf

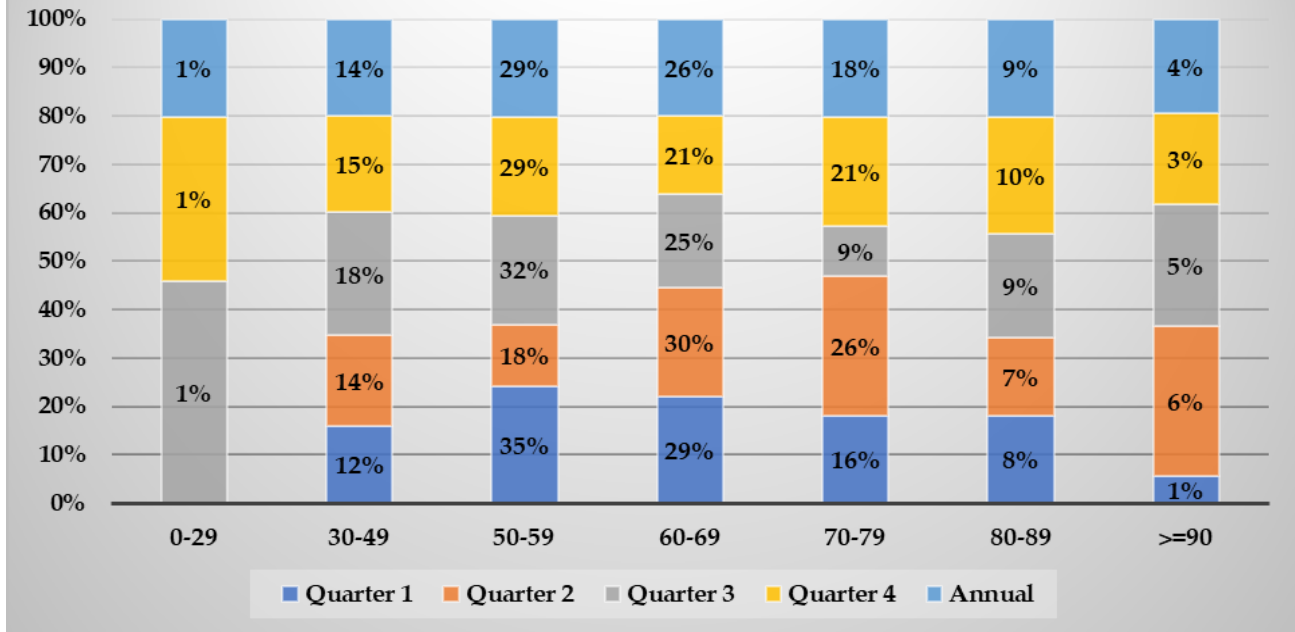
STEMI Method of Arrival, 2020



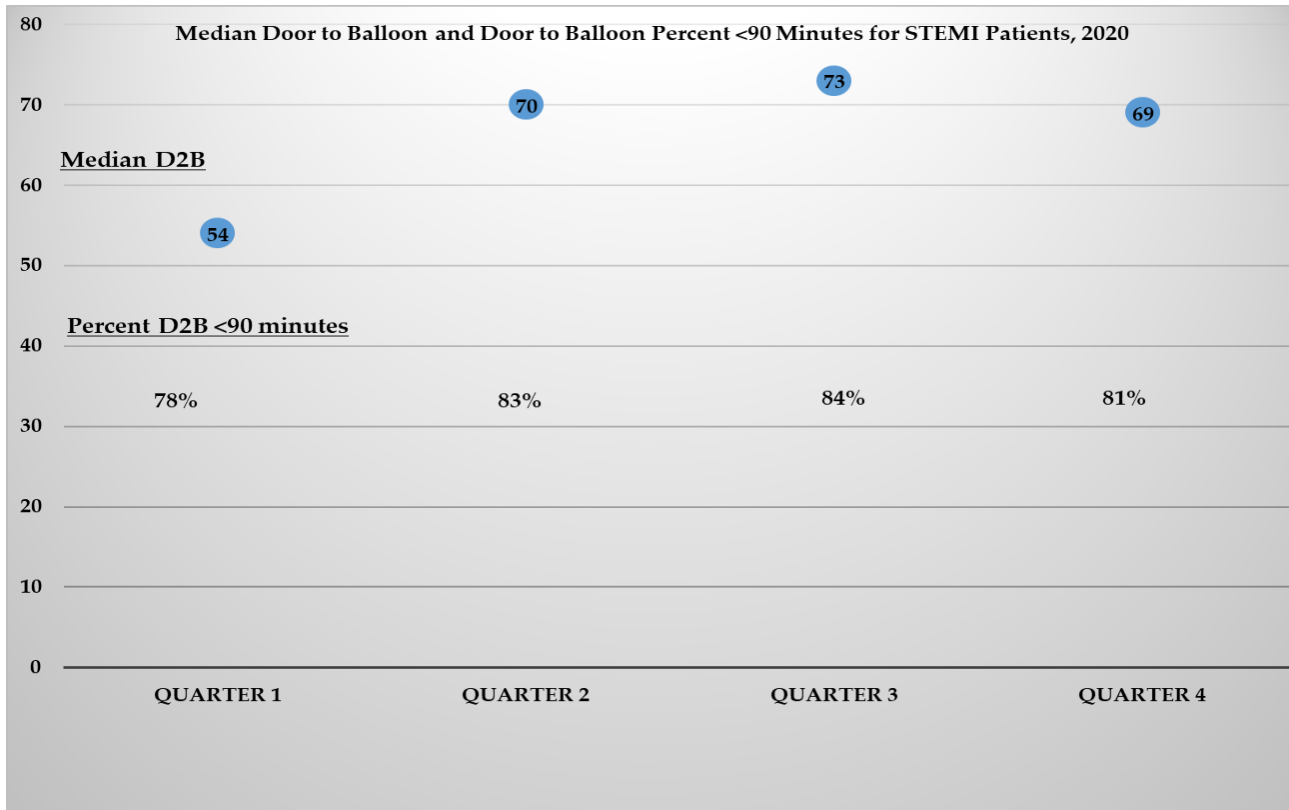
STEMI Patients by Gender, 2020



STEMI Patients by Age Groups, 2020



The median door to balloon time moderately increased throughout 2020 as STEMI specialty centers adjusted to the ongoing burden of COVID-19. During Quarter 3, when shelter in place restrictions began to ease, the median door to balloon time rose to its peak at 73 minutes. In all four quarters of 2020, the percent of door to balloon times less than 90 minutes exceeded 75%. These statistics reflect the continued valiant efforts of STEMI specialty center health professionals to provide stellar healthcare regardless of the impact of novel viruses.



Destination

In STEMI systems of care, STEMI patients should be transported to the closest, most appropriate facility staffed and equipped to perform immediate percutaneous coronary intervention (PCI) to facilitate reperfusion. STEMI destination policies that allow emergency medical services to bypass non-percutaneous coronary intervention-capable facilities are associated with significantly faster treatment times for patients with ST-Elevation MI. Time to treatment in STEMI's are a critical determinant of patient outcomes. Reducing delays relies on a robust emergency medical system that can transport a patient directly to a percutaneous coronary intervention-capable hospital, even if it means driving past a closer hospital.⁷

In the rare situation that the closest, most appropriate STEMI center is not available to accept a STEMI patient due to an internal disaster or occupied Cath Lab suites, field providers will transport the patient to the next closest, most appropriate STEMI receiving center.

Santa Clara County EMS Agency has a policy in place to assist field providers in determining destination for a STEMI patient. Policy document #602 – *911 EMS Patient Destination*; outlines the destination facilities for patient populations requiring specialty systems of care.

⁷ <http://circinterventions.ahajournals.org/content/11/5/e005706>

Communication

Studies show that EMS transportation is associated with shorter door-to-balloon time in patients with ST-segment elevation myocardial infarction. In addition to EMS transportation, when pre-hospital crews make notification of an incoming STEMI patient to the receiving hospital, it is again associated with shorter door-to-balloon time.⁸

Early notification of an incoming STEMI patient allows appropriate hospital resources to mobilize prior to patient arrival. Due to the time-sensitive nature of reperfusion on outcomes, the diligent practice of STEMI-alerts from the field is a vital element in the continuum of care spectrum as it is meant to effectively and rapidly communicate the need for expeditious treatment upon patient arrival.

Santa Clara County Pre-hospital providers have two ways to make pre-hospital notification. In addition to the 800 MHz radio system available to transporting units in Santa Clara, providers have a phone number that is assigned to each receiving hospital for the purposes of receiving radio reports. Either method of communication is reliable and utilized frequently amongst field crews.

Santa Clara County EMS Agency has a policy in place to give direction on administering a notification report to receiving hospitals. Policy document #501 – *Hospital Radio Reports* addresses the minimum acceptable information to be communicated and provides a standardized and consistent approach to pre-hospital notifications.

Inter-Facility Transfers

In Santa Clara County, eight out of 10 receiving hospitals are currently designated as STEMI receiving centers (SRC). Due to the geographic nature of the STEMI Receiving Centers in relationship to the EMS response boundaries in Santa Clara, field providers can transport identified STEMI patients directly to a STEMI receiving center without extended transport times. STEMI patients seen at non-SCRs occasionally require emergent transfer to SRC. For this reason, Santa Clara STEMI Receiving Centers have plans developed that include:

- Pre-arranged agreements with STEMI receiving centers for transfer of patients
- Pre-arranged agreements with EMS providers for rapid transport of patients who are eligible for time-sensitive treatments

Santa Clara County EMS Agency has a policy in place to provide guidelines for ambulance transport of patients between acute care hospitals. Policy document #620 – *Inter-facility Transfers – Ground Ambulance*, #621 *Interfacility Transfer – Air Ambulance*; outlines transfer agreements, medical control and levels of care to ensure that we are meeting patient needs while providing quality rapid transport to definitive treatment.

⁸ [https://www.ajemjournal.com/article/S0735-6757\(16\)30234-0/pdf](https://www.ajemjournal.com/article/S0735-6757(16)30234-0/pdf)

Data Collection

STEMI system of care monitoring and evaluation is conducted through SCCEMSA Quality Improvement Program.

Retrospective data collection and analysis lie at the heart of quality improvement. Data aids in understanding how well the systems work, identifying potential areas for improvement, setting measurable goals, and monitoring the effectiveness of change. Robust data systems, with the ability to report clinical indicators and performance measures, are a key tool to accomplish Quality Improvement (QI) activities. The goal is to connect data from across the continuum of care from Pre-hospital to In-Hospital to Post-Hospital disposition to optimally evaluate patient outcomes.⁹

Santa Clara County Emergency Medical Services Agency has a policy in place to standardize data elements collected from designated STEMI Receiving Centers and EMS providers to monitor, review, evaluate, and improve the delivery of pre-hospital advanced life support and hospital cardiac care services. Policy document #414 *STEMI Registry Standards*; #503 *EMS Patient Care Data System Overview* defines the data elements that are required from pre-hospital and hospital providers monthly.

STEMI Quality Improvement

Reaching for excellence in any system requires a functional decision-making process among the team of workers and users within that system. Inherent to this process is the need to know how the system is functioning and what to do to fix or improve it. The concept of continuous quality improvement (CQI) particularly in the field of health care relies mainly upon the following fundamental components:

- The availability of reliable and trusted information
- The ability to effectively communicate that information in easy-to-understand ways
- A standardized approach to reaching decisions and acting on those decisions

It is through SCCEMSA's Continuous Quality Improvement that the gap between performance and expectations narrows. It pushes the standards upward which results in better outcomes. Quality Improvement stresses understanding complex processes, measuring performance using reliable statistical methods, and using that information to build quality into our process.¹⁰

Santa Clara County Emergency Medical Services Agency has a policy in place to ensure continued high quality of patient care in emergency medical services provided in our community. Policy document #111 – *EMS Quality Assurance and Improvement Program*; establishes a system-wide Quality Improvement Program to continuously monitor, review, evaluate and improve the delivery of Pre-hospital, In-Hospital and Post-Hospital care of the cardiac patient. The program has active members from all system partners and includes Prospective/Concurrent/Retrospective reviews as well as a feedback system.

⁹ <https://emsa.ca.gov/wp-content/uploads/sites/47/2017/12/Core-Measure-Report-for-2016-Data.pdf>

¹⁰ Stroup, Craig, *Fundamentals of Emergency Medical Services System Evaluation and Quality Improvement* (Pinecrest Publishing House, 2015), 5.

STEMI Care Committee

As the delivery of cardiac care evolves to become more interconnected, coordinating care between pre-hospital Providers, Nurses, Physicians, and other disciplines has become increasingly important. In its simplest form, interprofessional collaboration is the practice of approaching patient care from a team-based perspective.

When implementing interprofessional collaboration and learning to work together and respecting one another's perspectives in healthcare, multiple disciplines can work more effectively as a team to help improve patient outcomes. In addition, it improves the coordination and communication between healthcare professionals and thus in turn, improves the quality and safety of patient care.

Santa Clara County Emergency Medical Services Agency has a STEMI Care Committee that has representation from each of the STEMI Receiving Centers as well as members that represent the pre-hospital providers in the area. The STEMI Care Committee meets regularly and is tasked at reviewing performance data, identifying areas in need of improvement, and carrying out and monitoring improvement efforts. For these activities, the committee uses a variety of QI approaches and tools, including Plan, Do, Study, Act (PDSA) cycles, assessments, audits and feedback, benchmarking, and best practices research. They provide expertise to address potential quality improvement initiatives within our STEMI system, which contributes, to the development or revision of STEMI related policies, procedures, and treatment protocols.

Santa Clara County EMS Agency has a policy in place that describes the scope of the role in membership on the STEMI Care Committee. Policy document #417 *Cardiac Care System Quality Improvement*; provides the context in which our interprofessional collaboration across the continuum of care meets quality improvement.

Education and Outreach

According to the Robert Wood Johnson Foundation (RWJF), enhancing interdisciplinary collaboration and coordination in healthcare is imperative. As the delivery of care becomes more complex across a wide range of settings and the need to coordinate care among multiple providers becomes ever more important, developing well-functioning teams becomes a crucial objective throughout the health care system. Health professionals have traditionally operated in separate spheres. Studies show that if they “breakdown the walls of hierarchical silos” and come together as a team, they will improve the safety and quality of patient care.

Collaboration between professions starts with interdisciplinary education, which can break down those walls. Health professionals must begin working together before they start working. Interdisciplinary education will lead to more effective communication across disciplines and, ultimately, safer, more affordable, and higher quality care.¹¹

In addition to interdisciplinary education, there is a vital component of public education and outreach that contributes to the health and wellness of a community. One of the goals identified in Healthy People 2020 is to increase the quality, availability, and effectiveness of educational and community-based programs designed

¹¹ <https://www.rwjf.org/en/library/articles-and-news/2010/11/interdisciplinary-collaboration-improves-safety-quality-of-care-.html>

to prevent disease and injury, improve health, and enhance quality of life. Educational and community-based programs play a key role in:

- Preventing disease and injury
- Improving health
- Enhancing quality of life

Health status and related health behaviors are determined by influence at multiple levels. Because significant and dynamic interrelationships exist among these different levels of health determinants, educational and community-based programs are most likely to succeed in improving health and wellness when they address influences at all levels and in a variety of environments/settings.¹²

Cardiac care public education and outreach will continue to contribute to the improvement of health outcomes in the United States and is a component of the Santa Clara County STEMI Critical Care System.¹³

Understanding the critical role that cardiac education and outreach has in healthcare, Santa Clara County EMS Agency has developed a reporting process for STEMI Centers as well as pre-hospital providers to identify education and outreach efforts within our community. The reporting matrix includes four elements of education and outreach.

Internal Education is driven towards “in-house” educational efforts on STEMI care. This would include mandatory staff training, in-service training and any other educational opportunities that are offered only to the staff members within that STEMI center system.

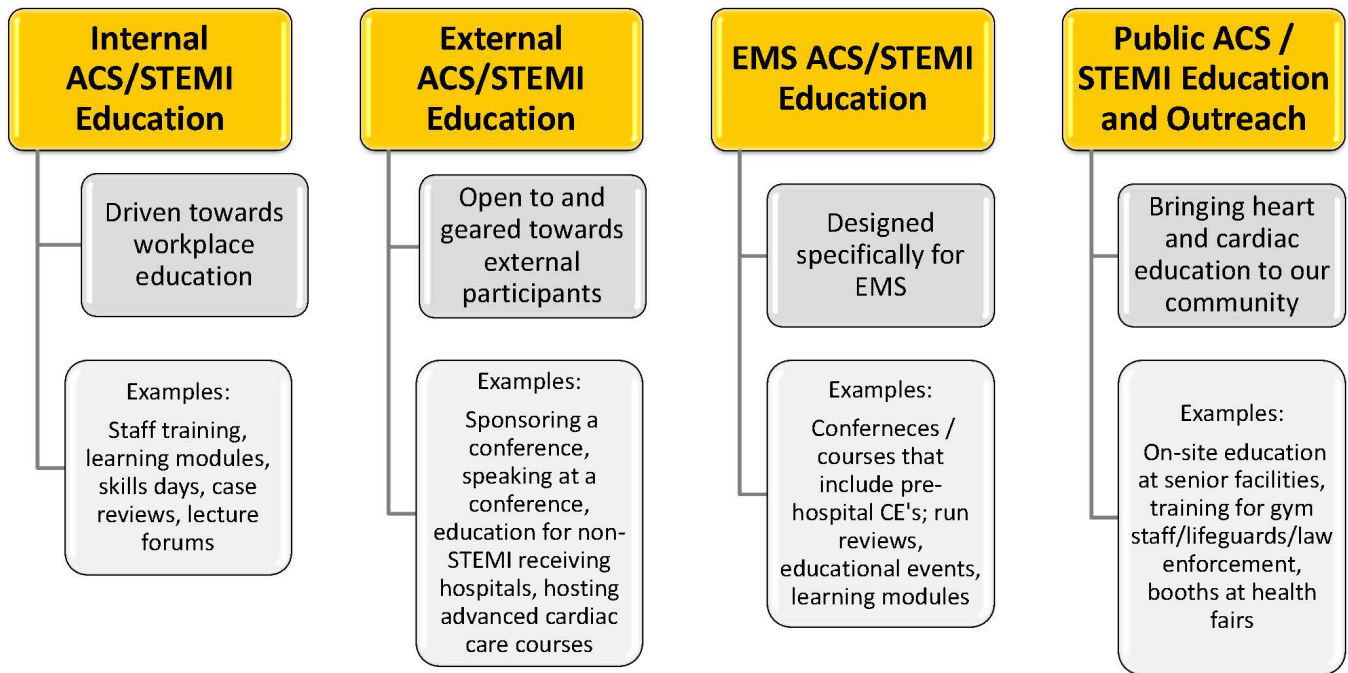
External Education is geared towards “external” participants who may include sponsoring a conference or speaking at a conference, STEMI education for non-STEMI receiving center hospitals, Lunch and Learn activities that are open to outside facilities and similar events.

Emergency Medical Services Education is education that is designed specifically for the EMS providers. This may include station visits by STEMI teams to review cardiac care and assessments or on-line learning management systems created to give a lecture with pre and post quizzes to evaluate learning. In addition, it may include run reviews or protocol updates.

¹² <https://www.healthypeople.gov/2020/topics-objectives/topic/educational-and-community-based-programs>

¹³ <https://www.healthypeople.gov/2020/topics-objectives/topic/educational-and-community-based-programs>

Public Education and Outreach is specific to bringing cardiac and heart health education to our community members. This area of education provides the greatest opportunity for the EMS Agency to partner with both pre-hospital providers and our STEMI Receiving Centers to deliver a comprehensive message of heart and vascular health to the members of our community.



Neighboring EMS Agencies

Due to the complex nature of an EMS System that provides care to close to 2 million persons with additional local operational oversight, it is imperative to have processes in place in which patients' care is uninterrupted despite crossing county lines. The STEMI system functions through collaboration with countywide and regional care providers in the pre-hospital, hospital, and rehabilitation phases of care.

STEMI System Goals and Objectives

Data elements that align with the set goals and objectives are compiled and presented at the STEMI QI Committee meetings.

Goal #1: Implement survey process for validation:

Goal #1	Objective(s)	Timeline	Status
Implement survey process for validation of STEMI Centers	<ul style="list-style-type: none"> • Applications for verification by Santa Clara County EMS Agency will be initiated in the winter 2021. • Surveys to begin in early 2022 • Hospital notifications of process provided • Designation Policy provides clear direction 	12/31/21	In progress

Goal #2: Decrease scene time

Goal #2	Objective(s)	Timeline	Status
Decrease scene time for STEMI patients	<ul style="list-style-type: none"> • Reduce pre-hospital scene times by tracking and reviewing scene times • Follow up with providers on all outliers 	12/31/21	In progress

Goal #3: Implement LifeNet

Goal #3	Objective	Timeline	Status
Implement use of LifeNet system at all STEMI centers	<ul style="list-style-type: none"> • Ensure all STEMI centers are equipped to receive EKGs from transporting agencies 	12/31/21	In progress

Goal #4: Provide feedback

Goal #4	Objective	Timeline	Status
Provide EMS feedback	<ul style="list-style-type: none">• Increase awareness of patient outcomes• Improve performance• Professional growth• Provide to Program Managers	Begin 12/21	In progress

Goal #5: Improve quality of service

Goal #5	Objective	Timeline	Status
Improve the quality and service delivered to STEMI patients	<ul style="list-style-type: none">• Collect and analyze SCC EMS system data over the continuum of care• Identify best practices and implement appropriate actions as needed• Discuss with Quality Committee needed improvements	Continually	In progress

Scheduled changes: None

System changes: None

Other Issues: No relevant issues currently.

SUMMARY

Santa Clara County EMS is guided by its mission: an essential service dedicated to ensuring the provision of quality STEMI care to the people of Santa Clara County through collaboration, facilitated regulation and system management.

Our EMTs, Paramedics, support staff, and leadership strive to model and support the agencies' core values of dignity, respect, innovation, professionalism, objectivity, leadership, and participation in all their actions. The product being the culmination of a comprehensive vision, assuring an EMS system in Santa Clara County that provides safe, quality, and effective pre-hospital care for STEMI patients.

The past year has allowed the Santa Clara EMS Agency the opportunity to further affirm our commitment and dedication to the community we serve. As a service, we continue to develop deep bonds in the neighborhoods of Santa Clara, not only in the delivery of pre-hospital emergency STEMI care, but through scientific based protocols and community outreach programs.

County of Santa Clara Emergency Medical Services System

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February 28, 2022

Elizabeth Basnett
Assistant Director
California Emergency Medical Services Authority
10901 Gold Center Drive, Suite 400
Rancho Cordova, California 95670

Dear Ms. Basnett,

Attached please find the 2020 Santa Clara County EMS Stroke Critical Care Plan. This Plan depicts the robust Stroke System of Care that began in 2005 in cooperation with area hospitals and stroke specialists of redirecting ambulances to stroke centers, which also featured a comprehensive data and quality management plan.

As the science of stroke care became increasingly clear that thrombectomy is the preferred treatment for patients with large vessel occlusion (LVO) stroke, the Santa Clara County EMS agency, in collaboration with stroke neurology and the EMS stakeholders, initiated direct-to-comprehensive stroke center field triage based upon timeframes of thrombolysis and thrombectomy. In February 2017, the American Heart Association/American Stroke Association published for the first time EMS stroke triage guidelines. Those guidelines used stroke severity scores to assess the probability of an LVO stroke and therefore inform the decision to transport directly to a comprehensive stroke center.

After a review of the literature on various stroke severity scoring strategies, a version was found very close to that used in the Santa Clara County EMS system for stroke assessment. It is the addition of that stroke severity score to field stroke decision making on hospital destination that resulted in the modification of our Stroke Clinical Protocol and training. We currently have added three Comprehensive Stroke Centers and one Thrombectomy Capable Stroke Center.

In addition, Santa Clara County is implementing a process for hospitals to apply for designation and evaluation based on the current California Code of Regulations Title 22. Social Security Division 9 Prehospital Emergency Medical Services Chapter 7.2 Stroke Critical Care System for the coming year.

Thank you in advance for your review of this Plan. Please do not hesitate to contact Lisa Vajgrt-Smith Specialty Programs Nurse Coordinator at 408-794-0628 or lisa.vajgrt-smith@ems.sccgov.org for any further questions.

Respectfully,

A handwritten signature in blue ink that reads "Jackie M. Lowther RN". The signature is written in a cursive style with a large initial "J" and "L".

Jackie Lowther RN, MSN, MBA
Director, Emergency Medical Services

Enclosure

cc: Rene Santiago, Deputy County Executive
Ken Miller, MD., EMS Medical Director
Louis J. Bruhnke, Chief, Deputy Director
Tom McGinnis, Chief, EMS Systems Division
Farid Nasr, MD, Specialty Care System



Santa Clara County

Stroke Plan

2020

**This plan was prepared for the
California Emergency Medical Services Authority
November 5, 2021**

Plan prepared by:
County of Santa Clara
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Executive Summary

California statute mandates the Emergency Medical Services Authority (EMSA) to adopt necessary regulations to carry out the coordination and integration of all state activities concerning Emergency Medical Services (EMS) (Health and Safety Code §1797.107).

In addition, State statute allows the EMS Authority to establish guidelines for hospital facilities, in cooperation with affected medical organizations, according to critical care capabilities (Health and Safety Code §1798.150).

As a result of these statutes, the EMS Authority established a multidisciplinary stroke taskforce for the development of Stroke System of Care Regulations for California.¹

California's Statewide Stroke Critical Care System is described in the California Code of Regulations; Title 22, Division 9, Chapter 7.2. These regulations outline the requirements of all components of the Stroke Critical Care System including the Local Emergency Medical Services Agency (LEMSA), prehospital providers, and hospitals.

Few things in medicine, certainly in EMS, have been changing as rapidly as the treatment of acute stroke. Of the 11 hospitals in Santa Clara County, 10 are designated stroke centers with three of those 10 designated as comprehensive stroke centers, one thrombectomy capable center and the remainder being primary stroke centers. 2018 was the first full year following implementation in December 2017 of a stroke severity scale and the selective triage of suspected stroke patients directly to a comprehensive stroke center.

Because data management, quality improvement and the evaluation process all have a vital role in providing high quality care to the stroke patient; these items have also been identified in the regulations. The overall goal of the regulations is to reduce morbidity and mortality from acute stroke disease by improving the delivery of emergency medical care within the communities of California.

The Santa Clara County Emergency Medical Services Agency (SCCEMSA) has been involved with the regulation development process alongside state and hospital system representatives. Santa Clara County has the regulations in place, including prehospital care policies to identify stroke patients, identify designated stroke receiving hospitals, and stroke destination policies.

As a requirement of the California Regulations, this document is to serve as a formal written plan for the SCCEMSA Stroke Critical Care System.

Santa Clara County Emergency Medical Services Agency's Stroke Critical Care System Plan has been written in accordance with Title 22, Division 9, Chapter 7.2 of the California Code of Regulations.

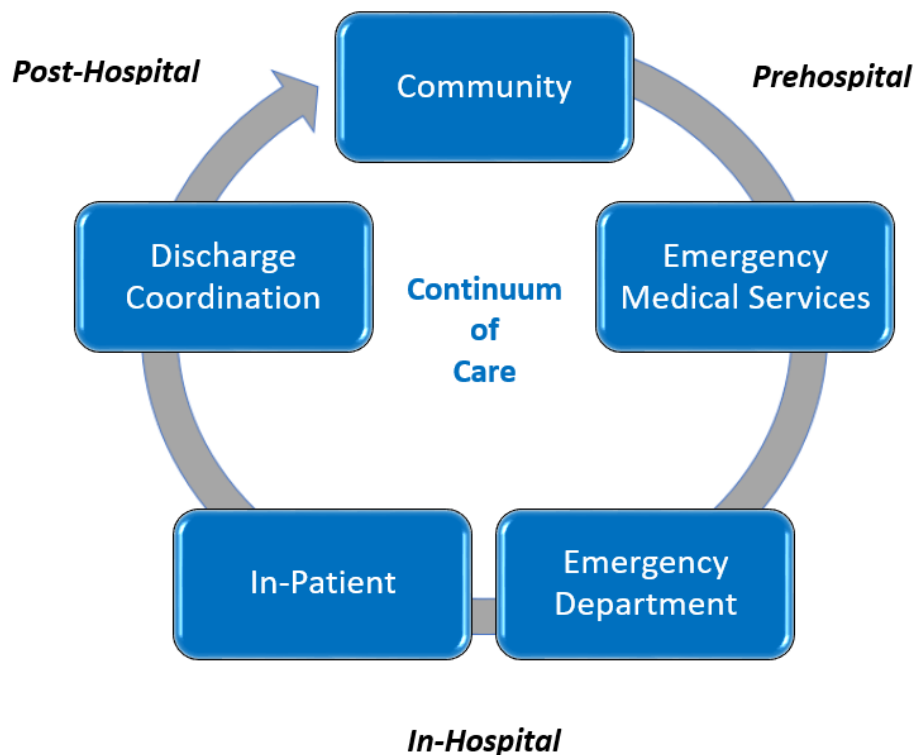
¹ <https://emsa.ca.gov/about-stroke/>

Stroke Critical Care System

Every year approximately 795,000 adult Americans suffer a stroke. Someone dies from stroke every four minutes and is the most common cause of adult long-term disability in the United States. It is a life-changing event that places heavy burden on patients, families, and caregivers. When a patient is suffering an ischemic or hemorrhagic stroke, timely intervention is critical to reverse the damage, reduce mortality, morbidity, and disability in addition to improving survivor quality of life.

Although there are 172 designated stroke centers in California, there have been no standardized statewide requirements for the development and implementation of a stroke critical care system until now. Hospitals have traditionally been designated as a stroke receiving hospital by their Local EMS Agency because of differing standards from one geographic area to the next. Public safety is best served when patients receive a standard of care based on national standards and best practices. This implementation of standardized statewide requirements for stroke care will provide consistent care across the state.

Santa Clara County's Stroke Critical Care System is a subspecialty care component of the EMS system that was developed by the Santa Clara County EMS Agency. This critical care system links prehospital and in-hospital care to deliver treatment to stroke patients who potentially require immediate medical or surgical intervention.

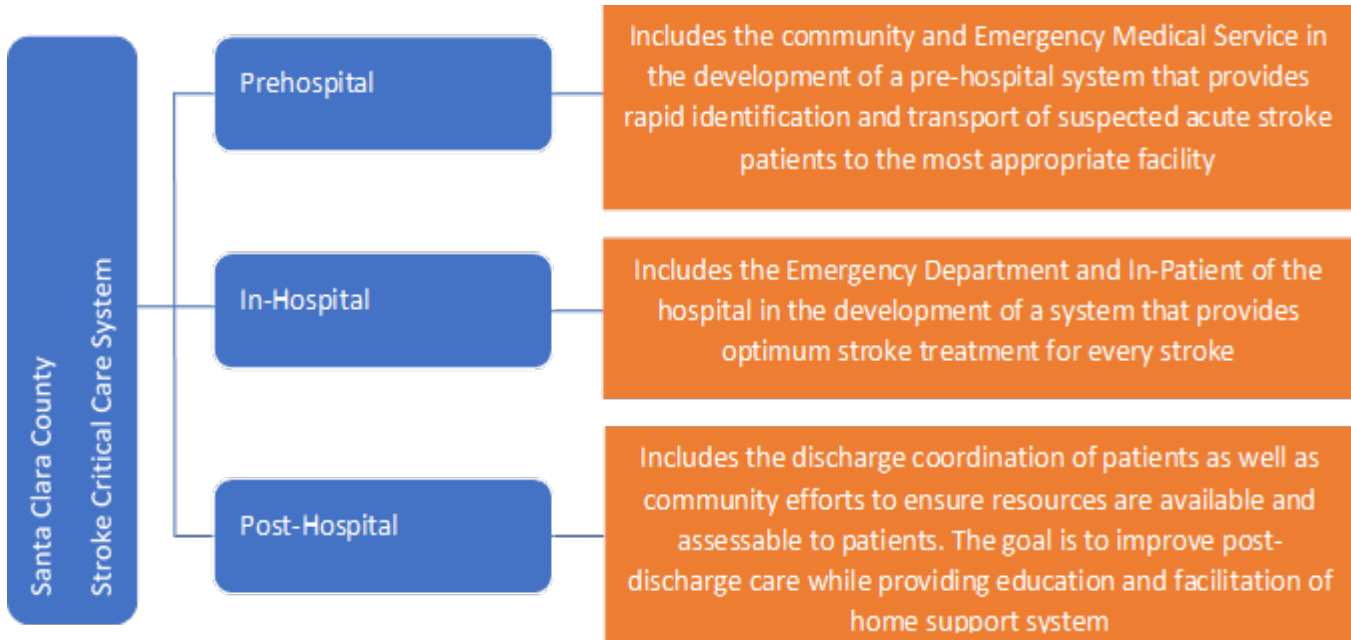


Stroke Continuum of Care

Stroke systems of care improve care and support for stroke patients throughout their health care journey. Over the last several years patient care has improved from the first symptoms of stroke through the transition from EMS to hospital care, throughout rehabilitation and follow up with primary care physicians to prevent complications and second strokes. Together, EMS agencies, hospitals, and health care facilities (i.e., assisted living, senior care) collect and analyze data about stroke patients and care. When best practices and data are shared, the different disciplines can work together to improve patient care.²

The continuum of care is important to caregivers and patients alike. It leads to an improvement of patient satisfaction levels, reduces costs, and improves health. Keeping up the continuum of care is especially significant for specific patient populations such as those patients who are more dependent on the health services, elderly patients, patients suffering from complex medical conditions, mentally vulnerable patients, and patients with chronic diseases. Due to the aforementioned examples, the continuum of care is particularly beneficial to the stroke patient population. Stroke systems of care depend on robust collaboration to ensure that the continuum of care is optimally exercised.

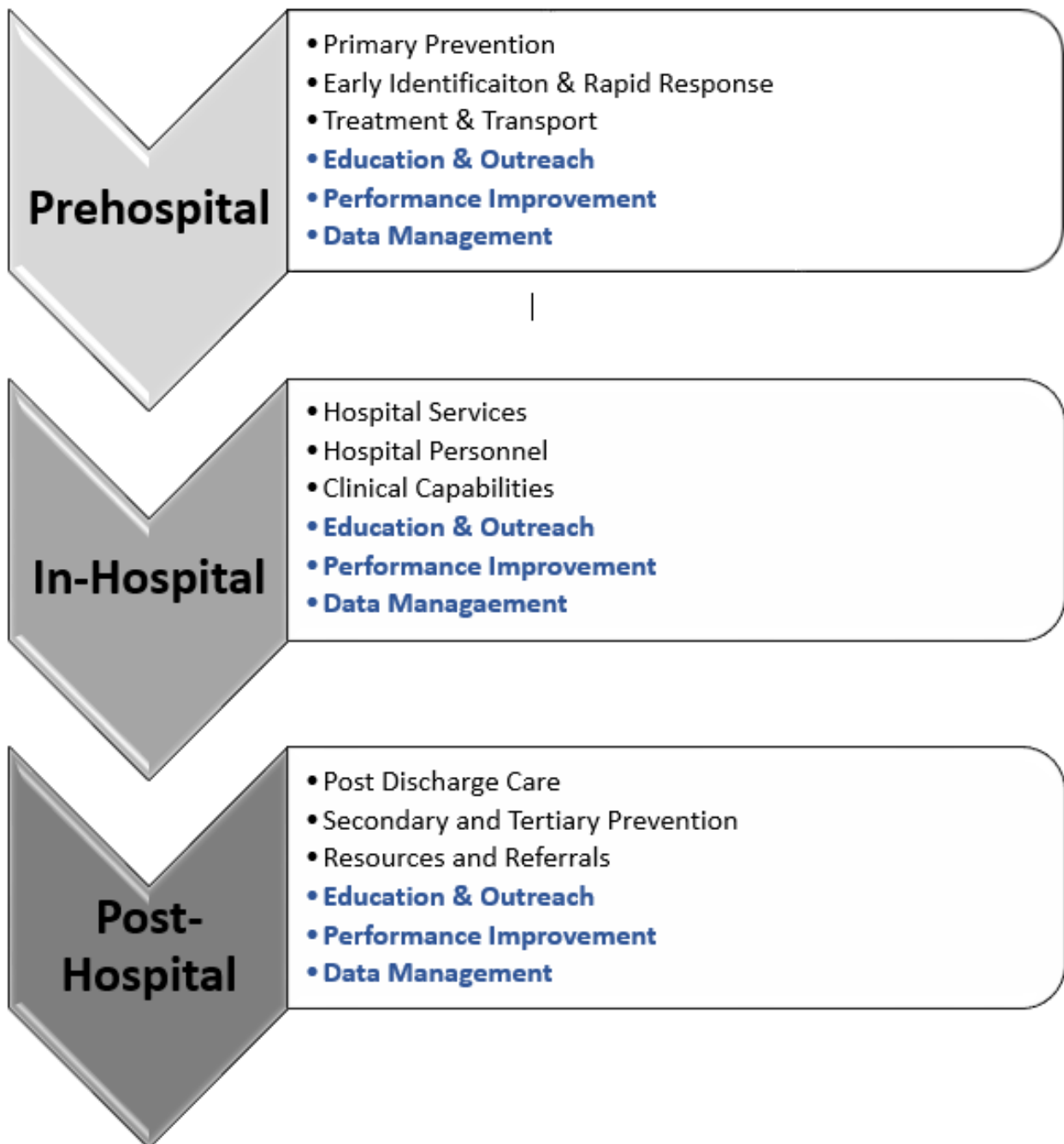
The Santa Clara stroke continuum of care can be broken down and evaluated at three levels:



² https://www.cdc.gov/dhdsp/programs/about_pcnasp.htm

Goals within the Continuum of Care

Within each level of the continuum of care, there are identified goals designed to build safety into the stroke system of care, ensuring that patients receive the safest, most reliable care across care-continuum.

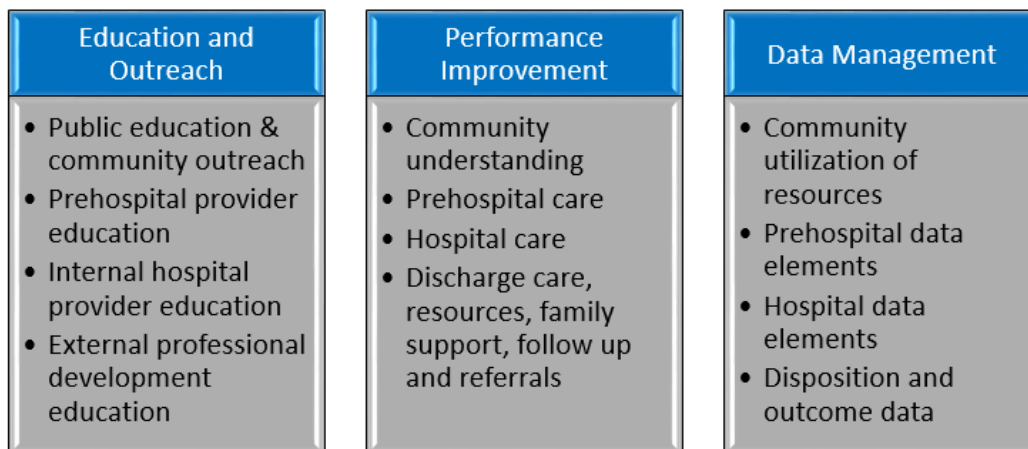


https://www.cdc.gov/dhdsp/programs/about_pcnasp.htm

Three Areas of Collaboration: A Team Approach

Recognizing that patient outcomes are greatly dependent on the quality of care within each level of care on the continuum, it is critical for Santa Clara providers to work in collaboration with a team approach wherever possible. Common themes span across the Prehospital, In-Hospital and Post-Hospital levels that identify opportunities to maximize SCCEMSA's team approach to care of the stroke patient.

- Education of the community, EMS and other healthcare professionals promote and support an integrated system of care. Interprofessional and interdisciplinary education systems prepare care providers to work collaboratively together as a team. When combined with community education and outreach efforts, the patients and their families have an active role in their personal health and well-being.
- Performance Improvement invariably involves work across multiple systems and disciplines within a practice. Within the healthcare practice continuum, this is particularly applicable as patients have various formal and informal care providers throughout their course of illness and into their discharge disposition.



A team approach from a truly integrated healthcare system will go beyond education, outreach, performance improvement and data management /sharing. SCCEMSA's aim is to create a seamless system, which requires EMS professionals and community partners to commit to the same-shared objectives and find ways to achieve them together. This team approach from a people-centered EMS system takes advantages of the strengths and resources brought by each organization and provider to protect the health and wellness of individuals and communities.

Stakeholders

Santa Clara County EMS Agency

Serving 1,936,259 people, the Santa Clara EMS Agency works diligently to ensure that the communities, which are spread over its approximate 1,132 square-miles, have access to stroke treatment and services that provide quality care based off best practices and evidence-based research.

SCCMSA's specialty care programs are further refined by the agency's commitment to excellence as defined in the Vision, Mission, and Values:

Vision

Assuring an EMS system in Santa Clara County that provides safe, quality, and effective prehospital care.

Mission Statement

The Santa Clara County Emergency Medical Services Agency is an essential service dedicated to ensuring the provision of quality patient care to the people of Santa Clara County through collaboration, facilitated regulation, and system management.

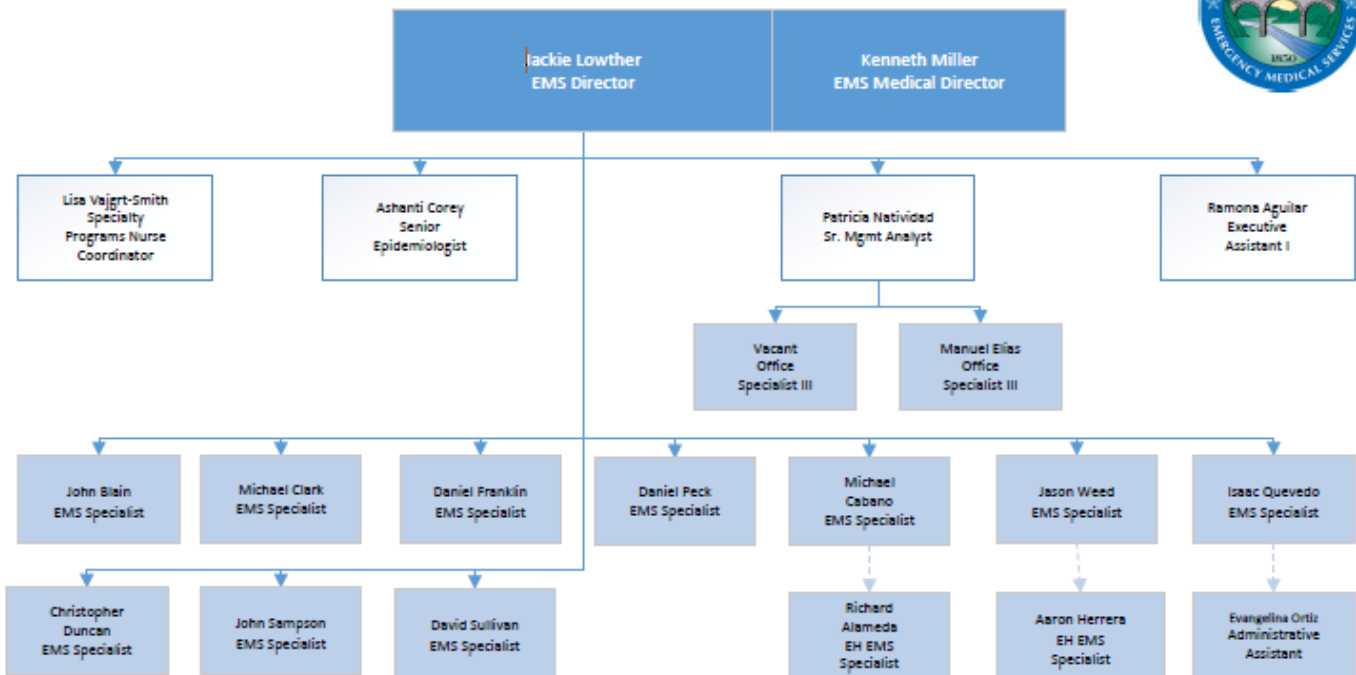
Values

- **Dignity and Respect:** We treat people with dignity and respect.
- **Progressive Innovation:** We are dedicated to the continuous improvement of our processes and systems, based on science, data, and best practices.
- **Professionalism and Objectivity:** We treat all individuals and organizations professionally, fairly, and without prejudice.
- **Leadership:** We lead through collaboration and facilitation to ensure accountability, the provision of quality patient care, while ensuring fiscal and operational stability.
- **Participation:** We value the contributions of the public, other agencies, and organizations in the development, implementation, and evaluation of the Santa Clara County EMS System.

The Santa Clara County Emergency Medical Services Agency is comprised of an EMS Director, EMS Medical Director, Specialty Programs Nurse Coordinator, ten EMS Specialists, one Senior Epidemiologist, one Senior Management Analyst, one Executive Assistant, one Administrative Assistant, two Office Specialists III's and two Extra Help EMS Specialists. Although each staff member has a different role in the Stroke Critical Care System, it is through the work that is managed collectively as a group that the Stroke System exhibits optimal performance.

Santa Clara County EMS Agency Organization Chart

Emergency Medical Services (EMS) Agency Organizational Chart



Santa Clara County Stroke Receiving Centers

Santa Clara County has ten (10) prehospital receiving centers. The Joint Commission currently certifies all ten of the receiving centers as Primary Stroke, three Comprehensive and one Thrombectomy Capable Stroke Centers.

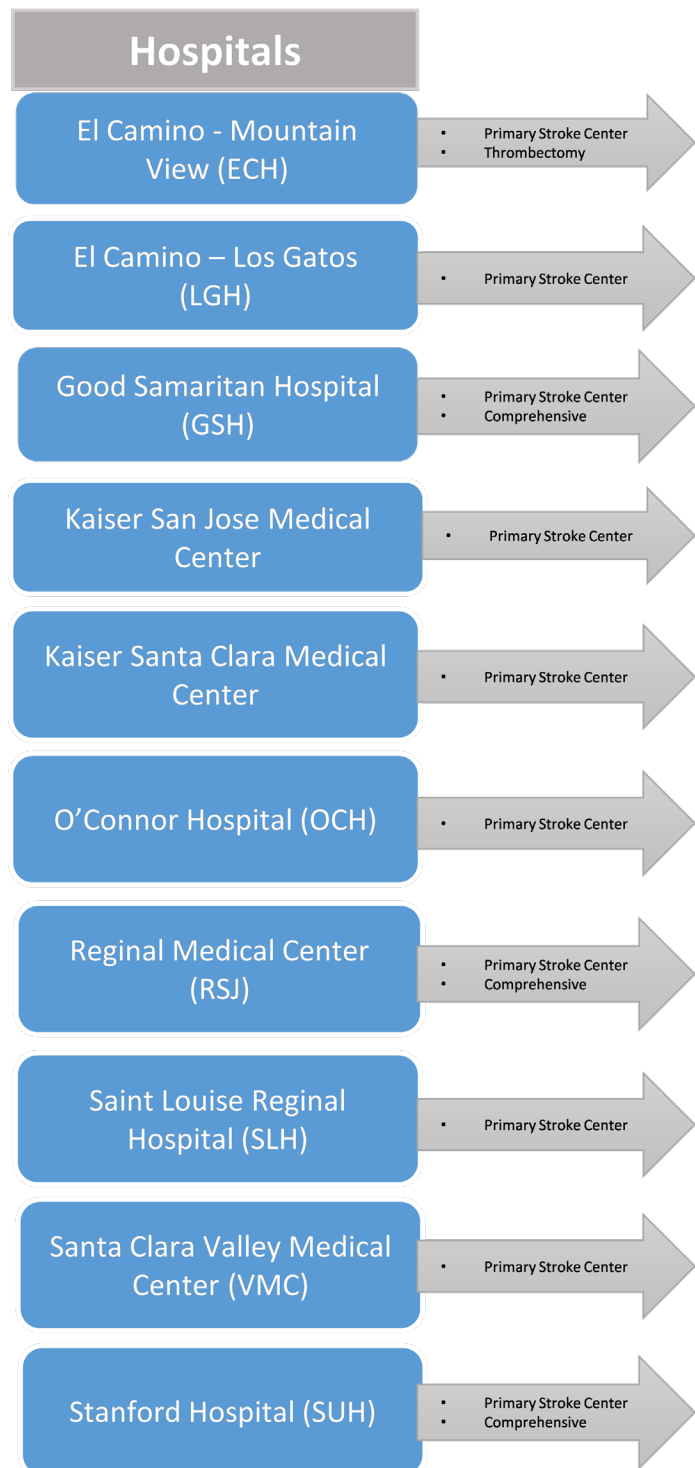
The California State Regulations define a Primary Stroke Center as a hospital that "...treats acute stroke patients and identifies patients who may benefit from transfer to a higher level of care when clinically warranted.

The California State Regulations define a Comprehensive Stroke Center as a hospital that "...with specific abilities to receive, diagnose and treat all stroke cases and provide the highest level of care for stroke patients". The California State Regulations define a Thrombectomy-Capable Stroke Center as a hospital that "...with the ability to perform mechanical thrombectomy for the ischemic stroke patient when clinically warranted."

Santa Clara County Emergency Medical Services Agency has written agreements with hospitals that are designated stroke receiving hospitals. To be considered for stroke receiving center designation, hospitals must hold current certification as a Primary Stroke Center by The Joint Commission and will begin filling out a SCCEMSA Stroke Center Designation Application by the fourth quarter 2021. The application packet will contain an evaluation tool that SCCEMSA will use to ensure that the facility meets the requirements to receive Stroke Center Designation.

Stroke Centers must also maintain compliance with Santa Clara County EMS Agency designation criteria outlined in Policy document #409 and #412.

Stroke Center Standards & Stroke Center Designation.



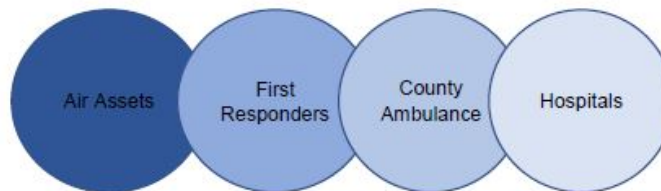
SCC Stroke Center Designation Application Packets will be available in 2021. Survey's will begin in the Spring of 2022.

Santa Clara County Prehospital Providers

The County of Santa Clara currently has a exclusive EMS Advanced Life Support (ALS) First Response and Advanced Life Support Emergency Ambulance Services. The county has a contract with Rural/Metro of California providing 911 transport services. A combination of ground, air, and specialty CCT transport are all offered within the county. The community can access emergency services through the 9-1-1 system.

Once on scene, the first responder and ambulance transport crews coordinate their efforts to rapidly identify, treat, and transport stroke patients to a Stroke Receiving Center. When needed, prehospital providers can contact base hospital personnel for medical support. Field crews notify the Stroke Receiving Center of the incoming patient with a “*Stroke Alert*” radio report to allow hospital staff to prepare for expeditious triage and treatment upon patient arrival.

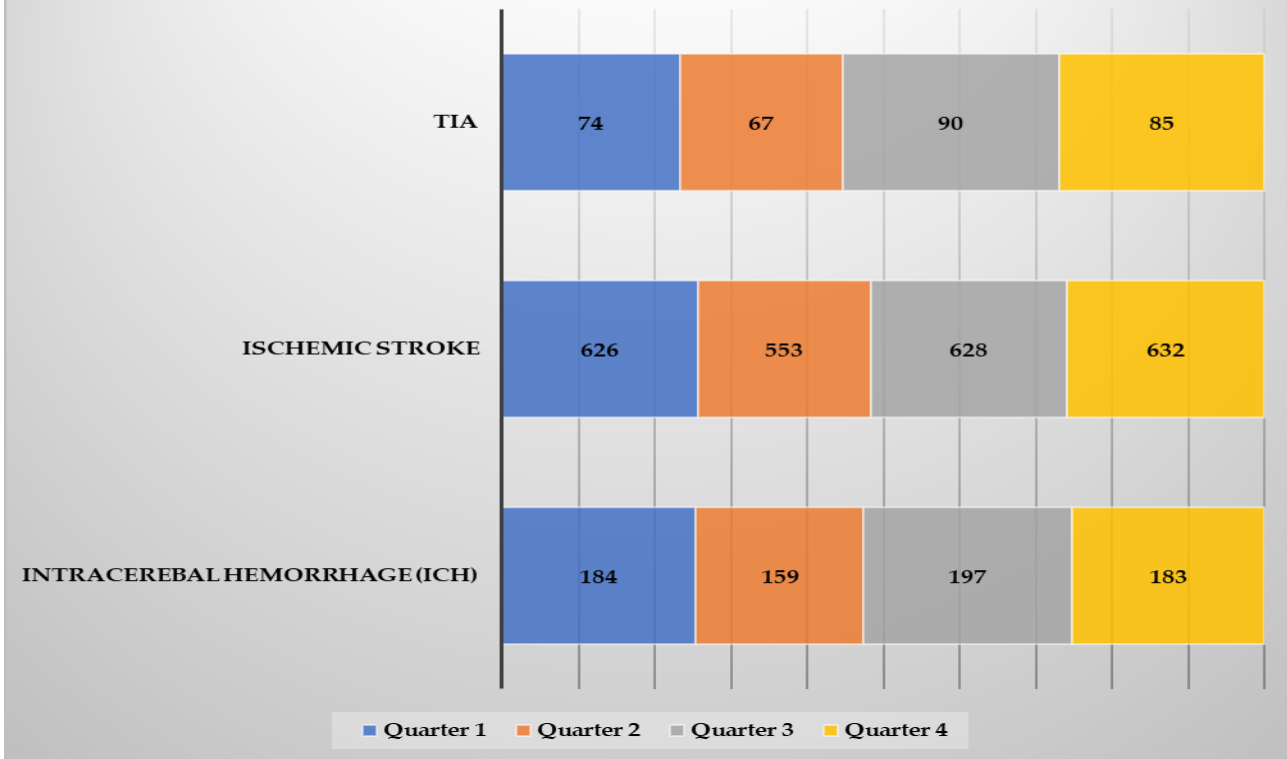
Prehospital providers work closely with the hospital staff to ensure that all pertinent information is relayed for a seamless transition within the continuum of care.



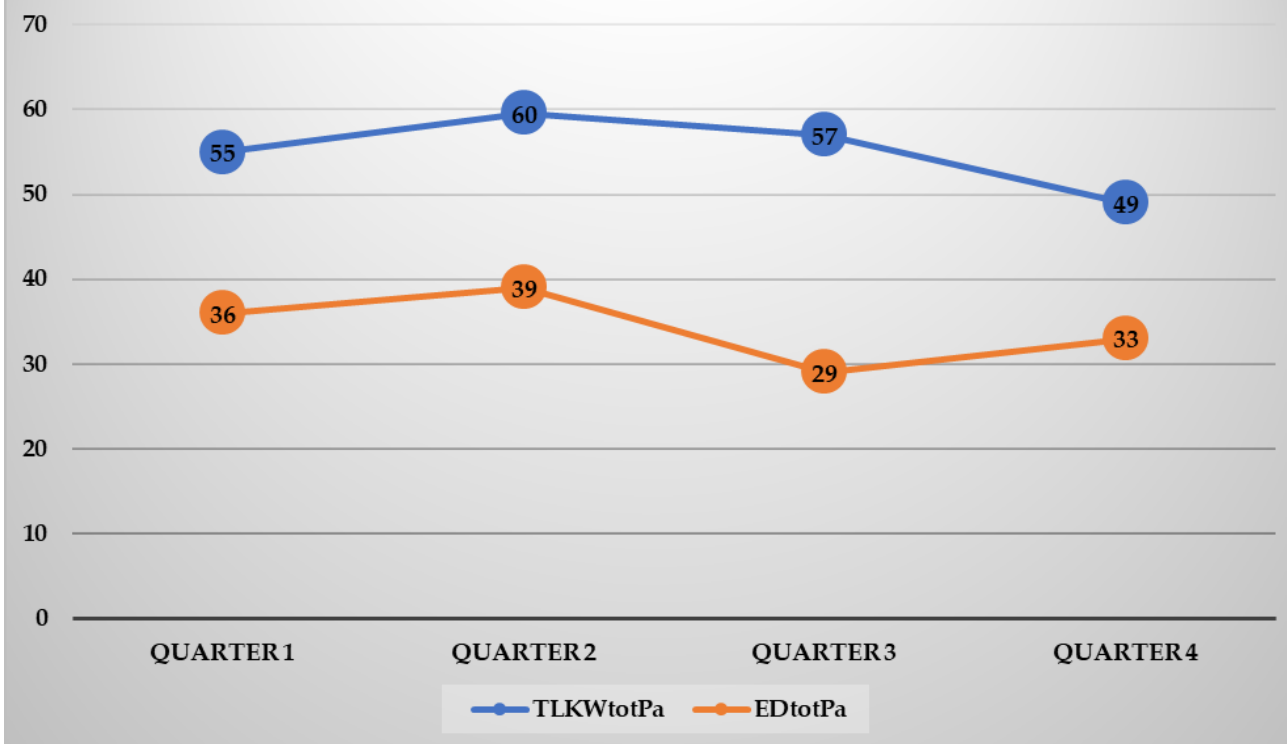
The Stroke Patient

One key factor in hospital care for a stroke patient is determining the type of stroke. The type of stroke is correlated with the location of the blocked vessel, thereby indicating the severity of the stroke and the type of treatment needed. All nine stroke centers in Santa Clara County are capable of thrombolysis, the administration of drugs to dissolve blood clots that have blocked major veins or arteries. As illustrated by the graph below, most strokes are caused by a blockage in a blood vessel that impedes oxygen delivery to the affected part of the brain, also called ischemic stroke. The second most common type of stroke is a blood vessel bleeding into the brain, also called hemorrhagic stroke. A transient ischemic attack is a brief blockage of blood supply to the brain and often a warning sign of an ischemic stroke. According to the Centers for Disease Control (CDC), Ischemic Strokes account for 87% of stroke patients in the United States. In 2020, 70% of stroke patients in the Santa Clara County EMS system suffered from Ischemic Stroke. While Transient Ischemic Attack (TIA) accounted for only 9% of stroke patients, it is critically important for these patients to understand this is an early warning sign of a future stroke.

Stroke Type, 2020

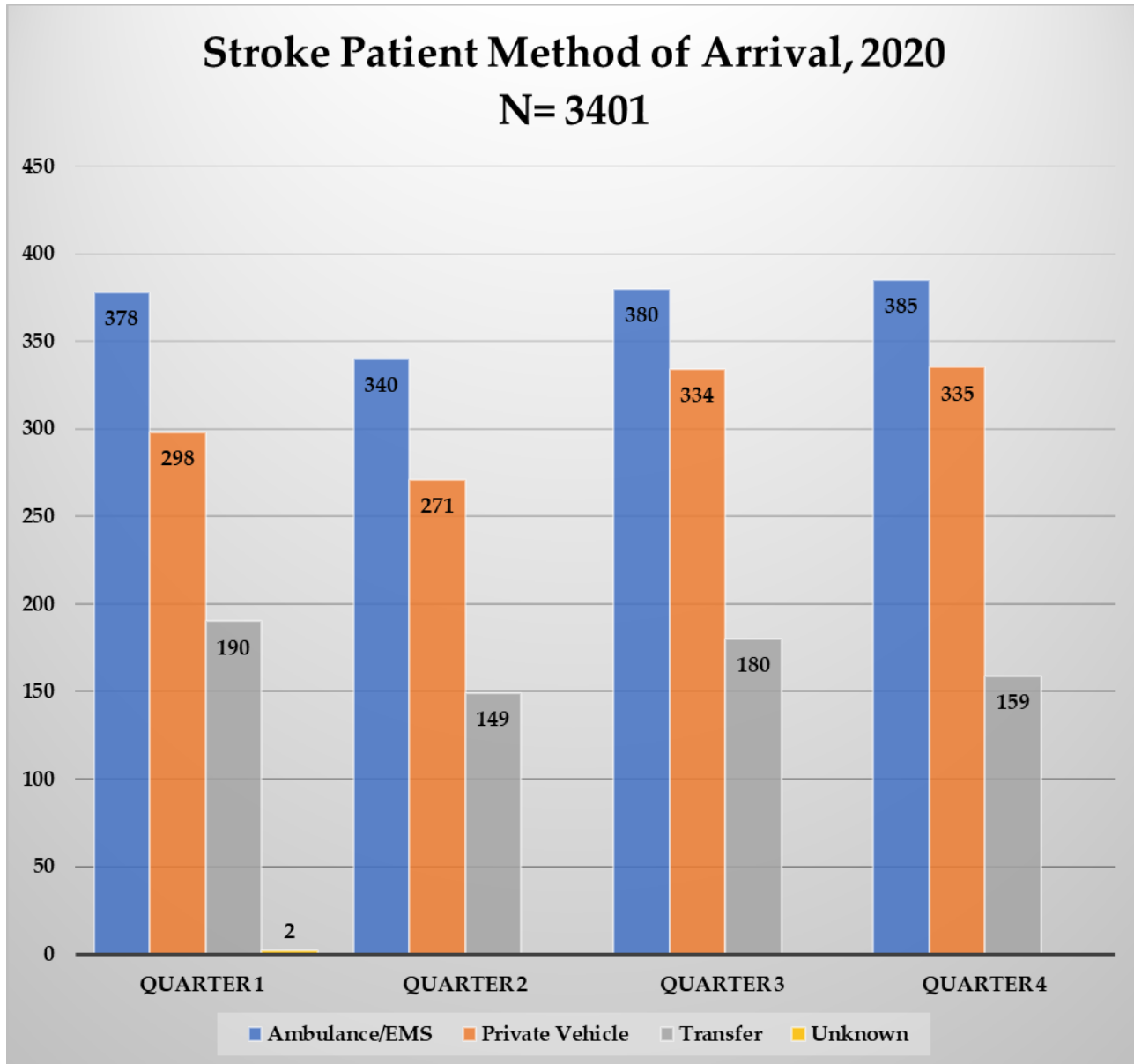


Median Stroke Benchmarks in Minutes, 2020



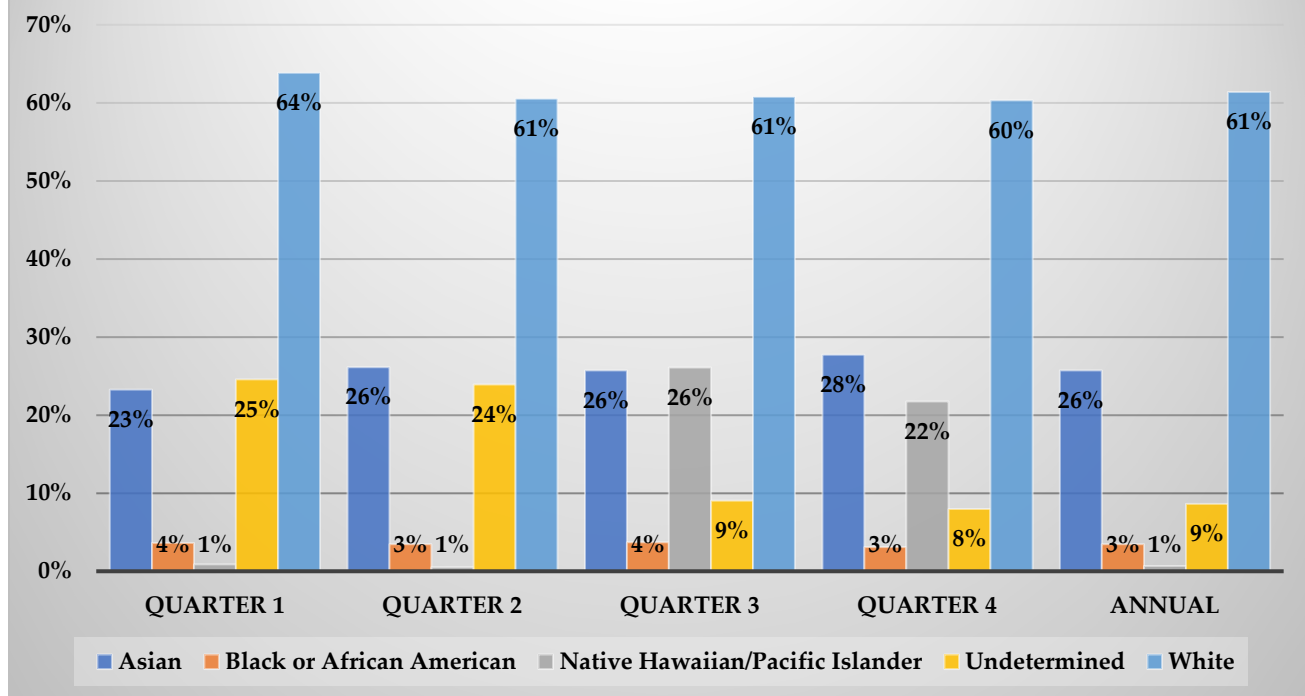
The median door to needle (Tissue Plasminogen Activator) time peaked at 39 minutes during Quarter 2 of 2020. The needle contains Tissue Plasminogen Activator, or tPa, a medication administered to break up a clot

in veins and arteries. As our county stroke centers continued to pivot throughout the pandemic, door to needle times remained well below the national benchmark of 60 minutes. The interval between time last known well (TLKW) and tPa should not exceed 270 minutes (4.5 hours). Aside from outliers resulting from interfacility transfers or data entry errors, the median time last known well to tPa did not exceed 60 minutes and reached its lowest point in Quarter 4 at 49 minutes.



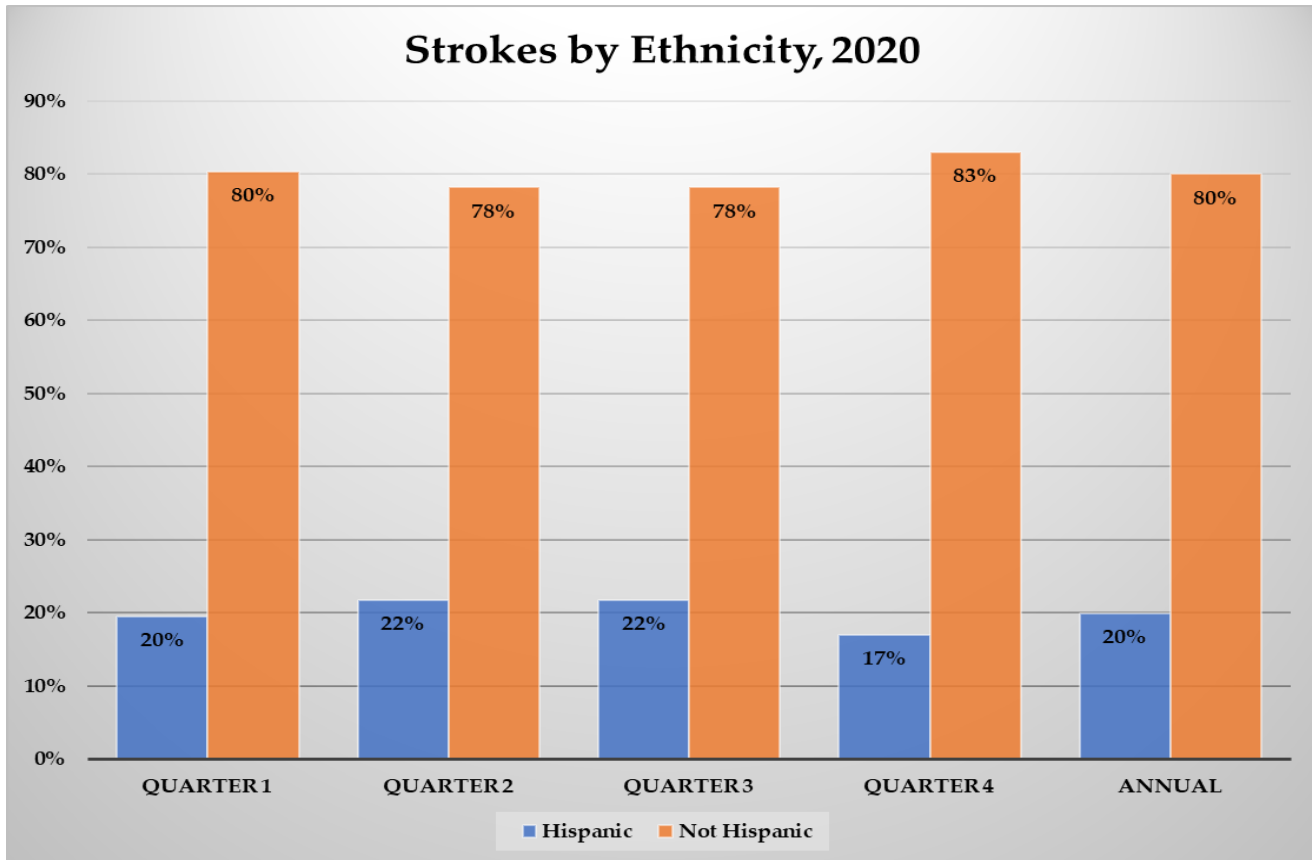
Like previous years, SCCEMS services were more heavily utilized by stroke patients than other methods of transport to the hospital. Stroke patients arrived at the hospital by emergency ambulance 1,483 times or 44% of the time in 2020.

Strokes by Race, 2020



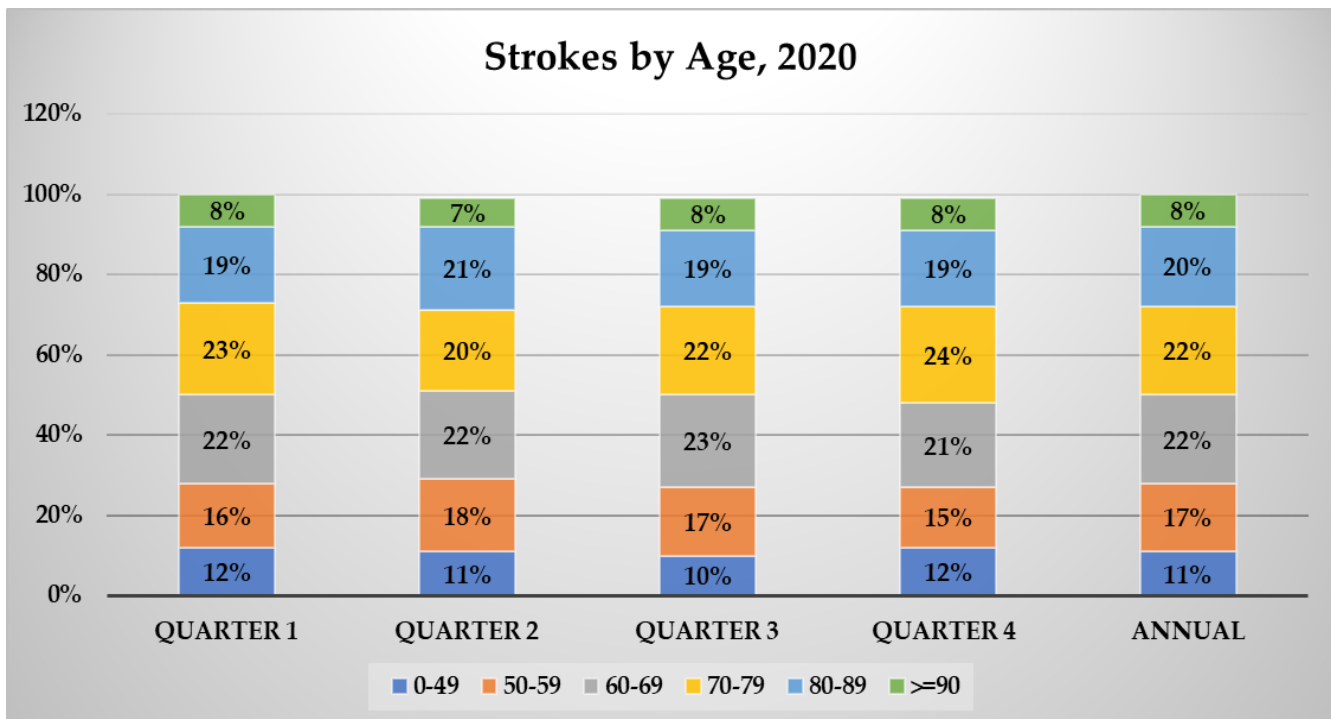
The racial and ethnic demographics of Santa Clara County are dominated by three groups: White, Asian and Hispanic. Similarly, almost 90% of strokes occurred among residents of Santa Clara County who identified as White (61%) or Asian (26%). A notable increase in cases among Native Hawaiian/Pacific Islander was observed between Quarter 2 and Quarter 3 (1% to 26%). In accordance with demographic data where Hispanics represent 25% of the total population, 17% to 22% of stroke patients identified as Hispanic in 2020.

Strokes by Ethnicity, 2020



While a stroke can occur at any age, nearly 80% of strokes occur in people 70-79 years old and the likelihood of stroke increases every 10 years after the age of 55.

Strokes by Age, 2020



Destination

In stroke systems of care, stroke patients should be transported to the most appropriate facility staffed and equipped to manage an acute stroke patient. This determination will include assessments of local resources and transport times.³

In the rare situation that the closest, most appropriate stroke center is not available to accept a stroke patient due to an internal disaster or a failure of all Computerized Axial Tomography (CT) scanners, field providers will transport the patient to the next closest, most appropriate stroke center.

Santa Clara County Emergency Medical Services Agency has a policy in place to assist field providers in determining destination for a potential stroke patient. Policy document #602; *Destination Policy*; outlines the destination facilities for patient populations requiring specialty systems of care.

Communication

Emergency Medical Service personnel should provide pre-hospital notification to the stroke-receiving center that a suspected stroke patient is enroute so that the appropriate hospital resources may be mobilized before patient arrival.⁴

Santa Clara County prehospital providers have two ways to make pre-hospital notification. In addition to the 800 MHz radio system available to transporting units in Santa Clara, providers have a phone number that is assigned to each receiving hospital for the purposes of receiving radio reports. Either method of communication is reliable and is utilized frequently amongst field crews.

Santa Clara County Emergency Medical Services Agency has a policy in place to give direction on administering a notification report to receiving hospitals. Policy document #501; *Hospital Radio Reports*; addresses the minimum acceptable information to be communicated and provides a standardized and consistent approach to prehospital notifications.

Inter-Facility Transfers

Fortunately, in Santa Clara County, 10 out of 11 receiving hospitals are currently certified by The Joint Commission at a minimum as a Primary Stroke Center. Although infrequent, there may be times when a stroke patient needs to be transferred from one acute care facility to another. For this reason, Santa Clara County Stroke Centers have plans developed that include:

- Pre-arranged agreements with stroke receiving hospitals (primary or comprehensive) for transfer of patients

³ [Recommendations for The Establishment of an Optimal System of Acute Stroke Care for Adults pp 26](#)

⁴ [2018 Guidelines for Management of Acute Ischemic Stroke pp 7](#)

- Pre-arranged agreements with EMS providers for rapid transport of patients who are eligible for time-sensitive treatments

Inter-facility transfers may apply to patients who would benefit from being transferred from a stroke-receiving hospital with primary stroke center capabilities to a comprehensive stroke center or equivalent.⁵ In either case, emergency transfer protocols are pre-arranged, and it is understood that transport should be provided with the urgency of a 911 response.

Santa Clara County Emergency Medical Services Agency has a policy in place to provide guidelines for ambulance transport of patients between acute care hospitals. Policy document #808; *Prehospital Care Interfacility Transportation*; outlines transfer agreements, medical control, and levels of care to ensure that patient needs are being met while providing quality rapid transport to definitive treatment.

Data Collection

The primary aim of Santa Clara County's Stroke Critical Care System is to develop a comprehensive system in Santa Clara County that provides timely access to proven treatments necessary to reduce morbidity and mortality. It is through continuous quality improvement efforts that stroke patients receive care based on best practices. Implementation of quality improvement programs and clinical best practices reduces morbidity and mortality, hence improves patient outcomes.

Retrospective data collection and analysis lie at the heart of quality improvement. Data aids in understanding how well the systems work, identifying potential areas for improvement, setting measurable goals, and monitoring the effectiveness of change. Robust data systems, with the ability to report clinical indicators and performance measures, are a key tool to accomplish Quality Improvement (QI) activities. The goal is to connect data from across the continuum of care from pre-hospital to in-hospital to post-hospital disposition to optimally evaluate patient outcomes.⁶

Currently, SCSEMSA collects stroke pre-hospital care data elements through Patient Care Record (PCR) extraction. Data elements that are specific to Stroke centers will be extracted through a common software registry platform shared with the hospitals called *Get with the Guidelines* in 2020.

Santa Clara County Emergency Medical Services Agency has a policy in place to standardize data elements collected from designated Stroke Centers and EMS providers to monitor, review, evaluate, and improve the delivery of pre-hospital advanced life support and hospital stroke care services. Policy document #413; *Stroke Registry Standards*; outlines the data elements that are requested from both prehospital and hospital providers monthly.

Stroke Quality Improvement

Reaching for excellence in any system requires a functional decision-making process among the team of workers and users within that system. Inherent to this process is the need to know how the system is functioning and what to do to fix or improve it. The concept of continuous quality improvement (CQI)

⁵ <https://emsa.ca.gov/wp-content/uploads/sites/47/2017/12/CDPH-Stroke-Document-2010-Published.pdf>

⁶ <https://emsa.ca.gov/wp-content/uploads/sites/47/2017/12/Core-Measure-Report-for-2016-Data.pdf>

particularly in the field of health care relies mainly upon the following fundamental components:

- The availability of reliable and trusted information
- The ability to effectively communicate that information in easy-to-understand ways
- A standardized approach to reaching decisions and acting on those decisions

It is through SCCEMSA's Continuous Quality Improvement that the gap between performance and expectations narrows. It pushes the standards upward which results in better outcomes. Quality Improvement stresses understanding complex processes, measuring performance using reliable statistical methods, and using that information to build quality into the process.⁷

Santa Clara County Emergency Medical Services Agency has a policy in place to ensure continued high quality of patient care in emergency medical services provided within the community. Policy document #111; *EMS Quality Assurance and Improvement Program*; establishes a system-wide Quality Improvement Program to continuously monitor, review, evaluate and improve the delivery of Prehospital, In-Hospital and Post-Hospital care of the stroke patient. The program has active members from all system partners and includes prospective / concurrent / retrospective reviews as well as a feedback system.

Stroke Care Committee

As the delivery of stroke care evolves to become more interconnected, coordinating care between prehospital providers, nurses, physicians, and other disciplines has become increasingly important. In its simplest form, interprofessional collaboration is the practice of approaching patient care from a team-based perspective.

When implementing interprofessional collaboration, learning to work together, and respecting one another's perspectives in healthcare, multiple disciplines can work more effectively as a team to help improve patient outcomes. In addition, it improves the coordination and communication between healthcare professionals and thus in turn, improves the quality and safety of patient care.

Santa Clara County Emergency Medical Services Agency has a Stroke Care Committee that has representation from each of the Stroke Centers as well as members that represent the prehospital providers in our area. The Stroke Care Committee meets regularly and is tasked at reviewing performance data, identifying areas in need of improvement, carrying out, and monitoring improvement efforts. For these activities, the committee uses a variety of QI approaches and tools, including Plan, Do, Study, Act (PDSA) cycles, assessments, audits and feedback, benchmarking, and best practices research. The Stroke Care Committee provides expertise to address potential quality improvement initiatives within the stroke system, which contributes, to the development or revision of stroke related policies, procedures, and treatment protocols.

Santa Clara County EMS Agency has a policy in place that describes the scope of the role in membership on the Stroke Review Committee. Policy document #411; *Stroke Care System Quality Improvement*; provides the context in which the interprofessional collaboration across the continuum of care meets quality improvement.

⁷ Stroup, Craig, *Fundamentals of Emergency Medical Services System Evaluation and Quality Improvement* (Pinecrest Publishing House, 2015), 5.

Education and Outreach

According to the Robert Wood Johnson Foundation (RWJF), enhancing interdisciplinary collaboration and coordination in healthcare is imperative. As the delivery of care becomes more complex across a wide range of settings, and the need to coordinate care among multiple providers becomes ever more important, developing well-functioning teams becomes a crucial objective throughout the health care system. Health professionals have traditionally operated in separate spheres. Studies show that if they “breakdown the walls of hierarchical silos” and come together as a team, they will improve the safety and quality of patient care.

Collaboration between professions starts with interdisciplinary education. To break down those walls, health professionals must begin training together before they start working together. Interdisciplinary education will lead to more effective communication across disciplines and, ultimately, safer, more affordable, and higher quality care.⁸

In addition to interdisciplinary education, there is a vital component of public education and outreach that contributes to the health and wellness of a community. One of the goals identified in Healthy People 2020 is to increase the quality, availability, and effectiveness of educational and community-based programs designed to prevent disease and injury, improve health, and enhance quality of life. Educational and community-based programs play a key role in:

- Preventing disease and injury
- Improving health
- Enhancing quality of life

Health status and related health behaviors are determined by influence at multiple levels. Because significant and dynamic interrelationships exist among these different levels of health determinants, educational and community-based programs are most likely to succeed in improving health and wellness when they address influences at all levels and in a variety of environments/settings.⁹

Public education and outreach will continue to contribute to the improvement of health outcomes in the United States and is a major component of the Santa Clara County Stroke Critical Care System.

Understanding the critical role that stroke education and outreach has in healthcare, SCCEMSA is developing a reporting process for Stroke Centers as well as pre-hospital providers to identify education and outreach efforts within the community. The reporting matrix includes four elements of education and outreach.

Internal Education will be driven towards “in-house” educational efforts on stroke care. This would include mandatory staff training, in-service training, and any other educational opportunities that are offered only to the staff members within that stroke center system or within the pre-hospital agency.

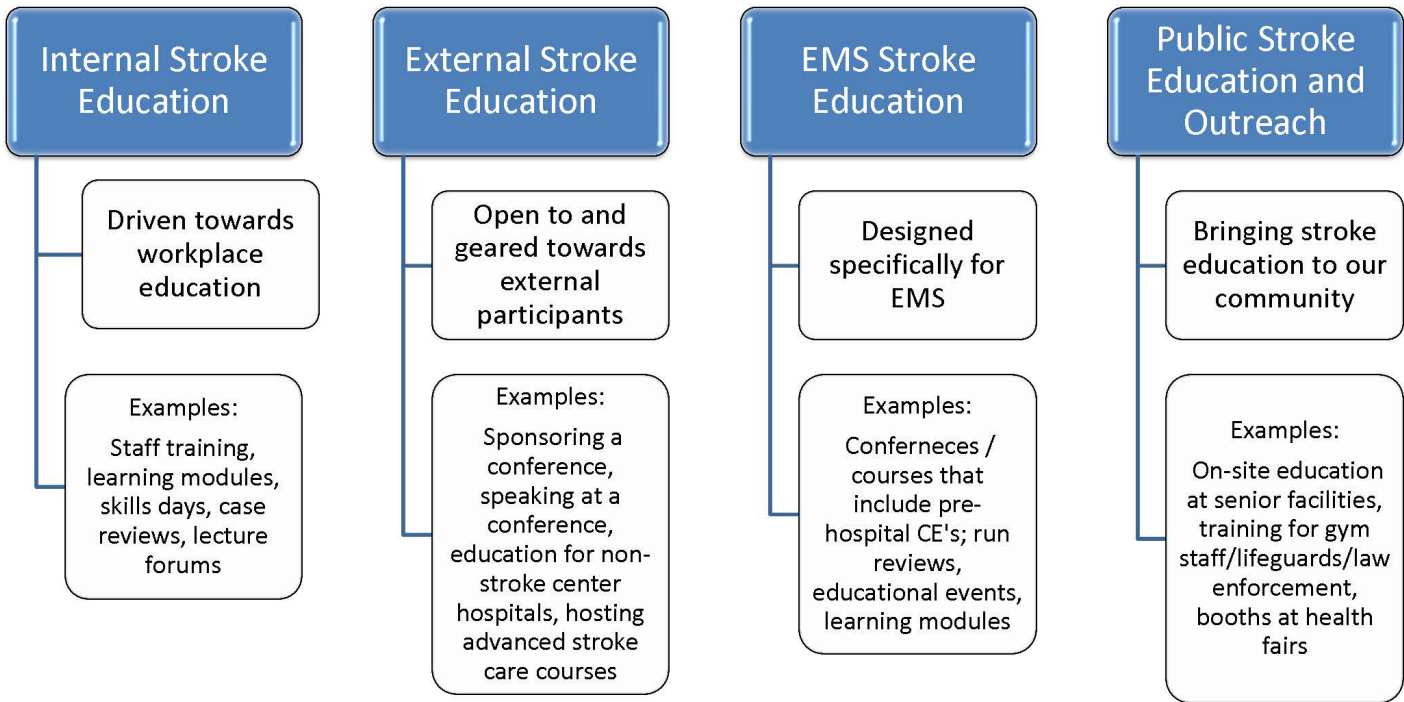
External Education will be geared towards “external” participants that may include sponsoring a conference or speaking at a conference, stroke education for non-stroke center hospitals, Lunch and Learn activities that are open to outside facilities and similar events.

⁸ <https://www.rwjf.org/en/library/articles-and-news/2010/11/interdisciplinary-collaboration-improves-safety-quality-of-care-.html>

⁹ <https://www.healthypeople.gov/2020/topics-objectives/topic/educational-and-community-based-programs>

Emergency Medical Services Education will be education that is designed specifically for the EMS providers. This may include station visits by stroke teams to review stroke care assessment scales or on-line learning management systems created to give lectures with pre and post quizzes to evaluate learning. In addition, it may include run reviews or protocol updates.

Public Education and Outreach will be specific to bringing stroke education to the community members. This area of education provides the greatest opportunity for the EMS Agency to partner with both prehospital providers and the stroke centers to deliver a comprehensive message of heart and vascular health to the members of the community.



Neighboring EMS Agencies

Due to the complex nature of an EMS System that provides care to close to 2 million persons with additional local operational oversight, it is imperative to have processes in place in which patients' care is uninterrupted despite crossing county lines. The stroke system functions through collaboration with countywide and regional care providers in the pre-hospital, hospital, and rehabilitation phases of care.

Stroke System Goals and Objectives

Data elements that align with the set goals and objectives are compiled and presented at the Stroke QI Committee meetings.

Goal #1	Objective	Timeline	Status
Implement survey process for validation of Stroke Centers	<ul style="list-style-type: none"> • Applications for verification by Santa Clara County EMS Agency will be initiated winter 2021 • Site surveys to begin in early 2022 • Hospital notifications of process provided at Stroke QI meetings • Designation Policy provides clear direction 	12/31/21	In progress

Goal #2	Objective	Timeline	Status
Decrease scene time for Stroke patients	<ul style="list-style-type: none"> • Reduce prehospital scene times by tracking and reviewing scene times • Follow-up on outliers with providers 	12/31/21	In progress

Goal #3	Objective	Timeline	Status
Community Outreach aimed to increase Stroke awareness	<ul style="list-style-type: none"> • Develop local stroke educational initiatives with stroke system stakeholders to increase stroke awareness, including identifying barriers or limitations to positive health behaviors. • Decrease treatment times • Increase use of 911 	12/31/21	In progress

Goal #4	Objective	Timeline	Status
Provide EMS feedback	<ul style="list-style-type: none"> • Increase awareness of patient outcomes • Improve performance • Professional growth • Provide to Program Managers 	Begin 12/21	In progress

Goal #5	Objective	Timeline	Status
Improve the quality and service delivered to stroke patients	<ul style="list-style-type: none"> • Collect and analyze SCSEMSA system data over the continuum of care • Identify best practices and implement appropriate actions as needed • Discuss with Quality Committee needed improvements 	Continually	In progress

Scheduled changes: None

System changes: None

Other Issues: No relevant issues currently.

Summary

In summary, the boundaries of prehospital EMS are evolving to meet the needs of our communities based on local data and science from around the globe. The ideal is for all communities to be served by well-planned and highly coordinated emergency medical systems that are accountable for performance and serve the needs of stroke patients within the system and improve the health of the entire community.

As in previous years, EMS expanded along with the needs of our stroke system, and we are confident in our sustainability and ability to adapt to the dynamic communities we serve.

Maintaining our current capabilities and striving toward future success depends on the outstanding support we receive from the local system stakeholders and the leadership of the Santa Clara County Board of Supervisors and County Executive Office.

Our primary goal is to provide the highest quality care for those in need of emergency medical services in the county. Through our exceptionally coordinated network of paramedics, EMTs, nurses, physicians, and other emergency professionals who work together with a strong commitment to excellence in all aspects of patient care, we will continue to achieve, and exceed, this goal.

We are confident that 2021 will bring many challenges and opportunities to grow. With the collaboration of our partners, we look forward to another year of providing the best care, anywhere.

County of Santa Clara Emergency Medical Services System



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February 28, 2022

Elizabeth Basnett
Assistant Director
California Emergency Medical Services Authority
10901 Gold Center Drive, Suite 400
Rancho Cordova, California 95670

Dear Ms. Basnett,

Attached please find the 2020 Santa Clara County Quality Improvement Plan. This Plan is an overview of an ongoing process in which all levels of our EMS system are involved. We are committed to adapting the care and service we provide based upon the constantly changing healthcare environment and ever-evolving standards of care. Continuous education is of upmost importance for our providers, our community as well as the EMS Agency. To continually improve the quality of care, we seek input from our stakeholders throughout the system we serve.

The goal for the Quality Improvement Plan has been to identify issues and areas where the Santa Clara County EMS Agency can improve as well as correct specific problems, analyze and track our efforts to determine whether we have been successful or further action is required. This plan is a proactive, ongoing effort.

In addition, you will find our current Measures of Success which are intended to highlight metrics which the Santa Clara County EMS Agency has determined are core to our mission and operational service delivery.

Thank you in advance for your review of this Plan. Please do not hesitate to contact Lisa Vajgrt-Smith, Specialty Programs Nurse Coordinator at 408-794-0628 or lisa.vajgrt-smith@ems.sccgov.org with any questions.

Respectfully,

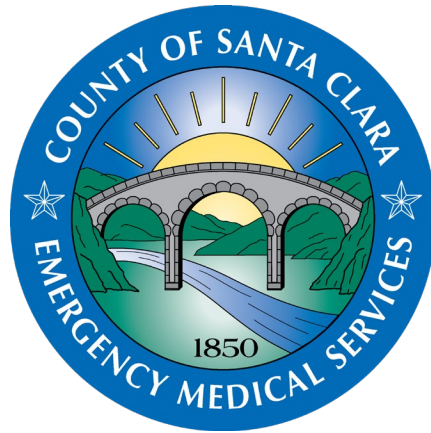
A handwritten signature in blue ink that reads 'Jackie M. Lowther RN'.

Jackie Lowther RN, MSN, MBA
Director, Emergency Medical Services

Enclosure

cc: Rene Santiago, Deputy County Executive
Ken Miller, MD., EMS Medical Director
Louis J. Bruhnke, Chief, Deputy Director
Tom McGinnis, Chief, EMS Systems Division
Farid Nasr, MD, Specialty Care System

Emergency Medical Services
Quality Improvement Program (EQIP)



Santa Clara County Emergency Medical Services System

2020

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PURPOSE

The purpose of the EMS Quality Improvement Plan (EQIP) is to provide structure and guidance for the quality improvement (QI) coordinators of EMS provider agencies within Santa Clara County. The EQIP describes the layout, requirements, and responsibilities of quality improvement programs at county and private provider levels. The EQIP also provides a detailed description of the administrative and committee structure of the Santa Clara County EMS Agency's QI network.

SUMMARY OF PROGRAM

The Santa Clara County EMS Agency is committed to providing quality services to all our communities. We are dedicated to improving patient outcomes to those we serve. Quality improvement occurs system-wide, as well as with individual organizations that are part of the Santa Clara County EMS system. Through the quality improvement committees and data collected from the EMS system and its hospitals, strategic changes are utilized to enhance the system, address weaknesses and promote the use of evidence to inform our decision making. These practices are integrated into the core operations of our provider agencies, as well as at the system level. The quality improvement program affords all participants, from administrator to first responder, an opportunity to affect change within the system. It provides a process to identify performance standards, to measure success, to report on progress, and ensures the system achieves the desired outcomes.

The Santa Clara County EMS System has made significant advancement in the way data is collected and utilized throughout the system. With the new data system in place benchmark reports, quality assurance modules and performance indicators are being applied at both the system and provider level. It is imperative that system participants use standardized data when comparing and analyzing reports. All system participants are now using data collection that is based on the National EMS Information System's (NEMSIS) data dictionary. In addition to Santa Clara County's participation in the NEMSIS data system, the county submits data to the California EMS Information System (CEMSIS) data base. By using this common language, we will decrease variability between provider agencies and allow for national and state benchmarking to ensure our system is providing the highest quality care.

The Santa Clara County EMS Quality Improvement (QI) Program also serves as a guideline for providers in the development of their organizational QI plans (EQIP). These QI plans are submitted annually to ensure compliance with California State Regulations and Santa Clara County policy and protocol. Training and education are an important aspect of every QI program. Starting with our system quality improvement coordinator, the agency has provided education to our committee members on data analysis and quality improvement methodologies.

ORGANIZATIONAL DESCRIPTION**Description of the Quality Improvement Unit at the EMS Agency**

The EMS Director: Jackie Lowther:

The Emergency Medical Services Director directs the Emergency Medical Services System for the County of Santa Clara.

The EMS Medical Director: Dr. Kenneth Miller:

The Medical Director oversees all medical and clinical components of the EMS system. This includes policy and protocol development, all equipment approval, emergency medical dispatch, base station operations and continuous quality improvement. The EMS medical director is assisted by the quality improvement coordinators and support staff.

The Specialty Programs Nurse Coordinator: Lisa Vajgrt-Smith:

This position is responsible for specialty care systems, clinical quality improvement associated with the specialty care systems, specialty care data collection, committee support, and ongoing evaluation of specialty care service delivery.

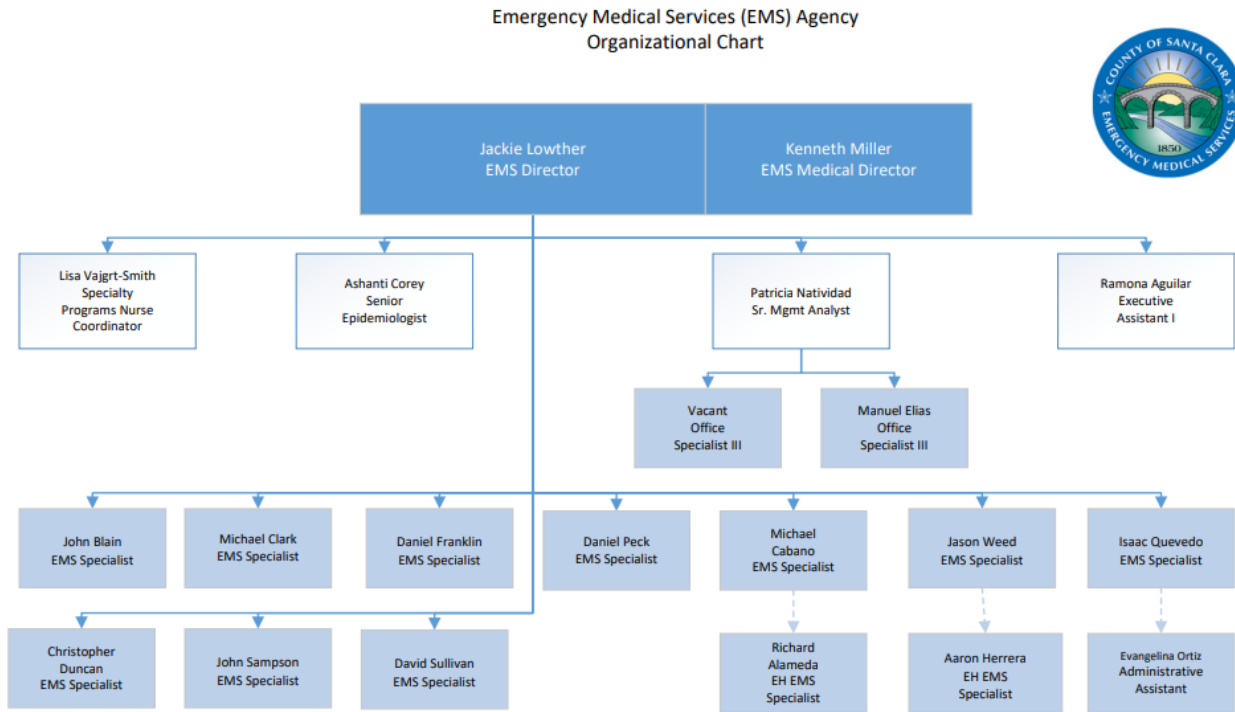
Clinical Quality Improvement EMS Specialist: John Sampson, David Sullivan:

These positions are responsible for the development and implementation of the EMS systems quality improvement (QI) plan. This includes protocol development, Prehospital data collection and analysis of quality indicators, management of system wide QI initiatives and or studies. It also serves as clinical liaison to all prehospital providers and the base station.

The EMS Epidemiologist: Ashanti Corey

This position provides oversight for all QI data collection and process analysis. This includes prehospital data, specialty care data, stakeholder data requests and data reports.

EMS Agency Organizational Chart depicts the complete reporting structure of the Santa Clara County EMS Agency.



Committees that Influence and Direct Quality Improvement.

The following committees play a crucial role in the development and refinement of clinical care and clinical practice within the EMS system. Data is presented (as is outlined in this plan) within the QI committees to inform the prehospital providers and stakeholders on the quality performance of each respective medical specialty service. The QI committees are as follows:

Prehospital Care System Quality Improvement Committee (PCSQIC):

This committee is composed of EMS system stakeholders from all disciplines. This committee implements and reviews system wide quality improvement initiatives pertaining to EMS prehospital care. The committee is responsible for determining pre-hospital the annual quality indicators, protocol and policy development, equipment evaluation and the implementation of system wide continuous quality improvement (CQI) processes to address system performance issues. This committee works closely with all the county’s QI committees along with the EMS Medical Director to disseminate information and CQI initiatives.

The Medical Advisors Committee (MAC):

This committee is composed of the EMS Medical Director, the base hospital physician liaison, the contracted medical advisors of each fire department, the contracted medical advisor of the county's contracted ambulance provider, EMS QI coordinators from prehospital provider agencies and assigned EMS Agency staff. This committee advises the EMS Medical Director on the development and improvement of prehospital policies and protocols.

Trauma Care System Quality Improvement Committee (TCSQIC):

This committee includes members from the Trauma Executive Committee (TEC) as well as multidisciplinary members of trauma centers, emergency care providers, and medical specialties such as neurosurgery and orthopedics. The TCSQIC is the medical care review committee, as well as an advisory group for trauma system issues.

Stroke Care System Quality Improvement Committee (SCSQIC):

This is a multidisciplinary committee composed of designated stroke center medical directors, stroke coordinators, the EMS medical director, EMS QI Coordinators from prehospital provider agencies and assigned EMS Agency staff. This committee is responsible for monitoring stroke system performance and recommendations for system improvement.

Cardiac Care System Quality Improvement Committee (CCSQIC):

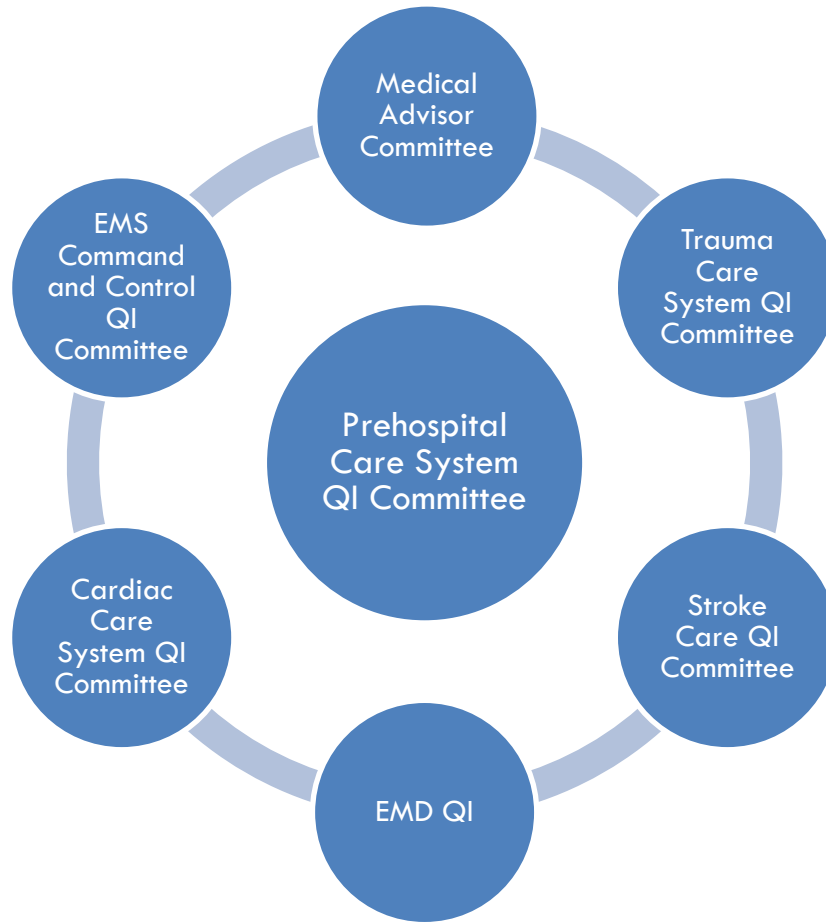
This is a multidisciplinary committee composed of STEMI center medical directors, STEMI center program managers, the EMS Medical Director, physicians, EMS QI Coordinators from prehospital provider agencies and assigned EMS Agency staff. This committee is responsible for monitoring the STEMI system performance and recommendations for system improvement.

EMS Command and Control Quality Improvement Committee (ECCQIC):

This committee is composed of Santa Clara County EMS system providers only. This committee addresses the operational aspects of EMS response and event mitigation of unique and/or large-scale events in the county.

Emergency Medical Dispatch Quality Improvement Committee:

This Committee is composed of representatives from each emergency medical dispatch center within the county, EMD Dispatchers, The EMS Medical Director and assigned EMS Agency staff. This committee concentrates on addressing emergency medical dispatching protocols, Medical Priority Dispatch System (MPDS) usage and peer call review.



OBJECTIVES OF THE EMS QUALITY IMPROVEMENT PROGRAM

- A. Ensures the standard of care for pre-hospital patients in Santa Clara County through system surveillance at the LEMSA and provider level.
- B. The EMS medical director works in collaboration with the Prehospital Care System Quality Improvement Committee (PCSQIC).
- C. Collect and evaluate pre-hospital and specialty care data to determine key performance indicators (KPI) for system surveillance.
- D. Ensures EMS Agency and System provider EQIPs follow California Code of Regulations, Title 22, Division 9, Chapter 12, Article 4

- E. Ensures all prehospital provider agencies review and report on quality Indicators (EQIP) on a monthly basis to the Santa Clara County EMS Agency. All data from the quality indicators (EQIP) will be maintained by the Santa Clara County EMS Agency and the reporting provider agency.
- F. Ensures each prehospital provider agency submits an annual report of quality improvement activities to the Santa Clara County EMS Agency.
- G. Oversees all clinical trial or pilot studies conducted within the emergency medical services system along with transmittals of updates and/or data to governing bodies.
- H. Prepares final data analysis on the selected annual quality indicators for the EMS Agency's annual report submitted to the State EMS Authority.

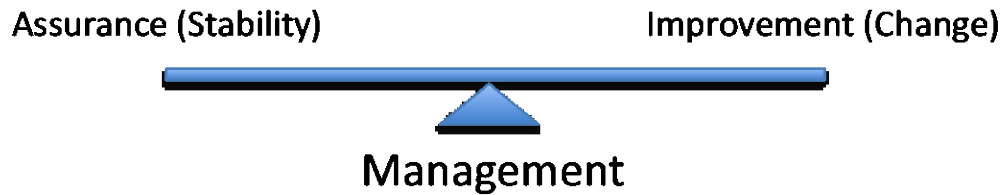
MEASURING PERFORMANCE

Approach – It is important to understand these three approaches.

Quality Assurance – is the attempt to maintain a given level of quality or performance. This is accomplished by monitoring standard benchmark and key performance indicator reports that highlight the critical aspects of the EMS System. As variances in performance are noted, quality improvement projects may be employed.

Quality Improvement – is the attempt to improve the level of quality or performance. This is accomplished through quality improvement projects. Most initiatives will follow the DMAIC methodology, as describe later in this document.

Quality Management – (or simply management as depicted below) – is the balance of the first two approaches.



It is important to note, we are not just talking about clinical quality or performance but instead are talking about everything that an organization does to provide care and service to the people they serve.

When measuring performance, three types of indicators should be evaluated:

1. Rule indicators are standards or protocols where a variance does not cause an adverse patient outcome. In reference to Policy 108: System Variance Reporting, rule indicators would generally be classified as a Level B Variance, in which a variance was documented but no negative patient outcome occurred directly because of it.
2. Key performance indicators (KPIs) are rates that represent processes crucial to the EMS system performance. Of interest is the delineation between special cause and common cause variation.
 - a. **Special Cause Variation** arises when there is a given assignable cause for the observed data that is not thought to be inherent to the process being measured.
 - b. **Common Cause Variation** assumes that the observed variation is inherent to the process being measured. This delineation between the two is crucial as actions required of these two types of data differ. Within each key result area (KRA) we use statistical process control charts to monitor and focus on improving performance of several KPIs.
3. **EMS System Variance Indicators**

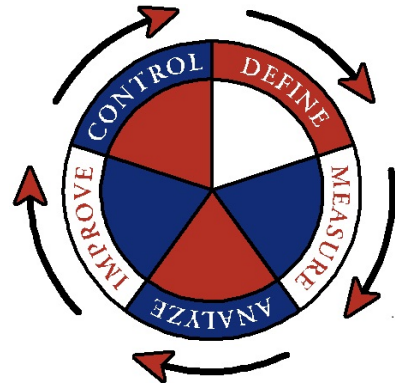
EMS system variance indicators are situations in which a variation in treatment or practice results in an adverse outcome, complaint, or a conflict.

4. Management of Systems and Processes

- a. If it is determined that performance is not meeting required or desired expectations, but no special cause is identified, then, based on prioritization of projects, a quality improvement project may be initiated. During the project, common cause variation will be evaluated, and the process will be redesigned in such a manner that it can produce the desired level of performance.
- b. On occasion, it may be determined that an entirely new process is required to meet the needs of patients and/or customers. In this scenario, a design of experiment project will be initiated with the goal of designing a new process that will meet or exceed the level of performance expected by patients and/or customers.

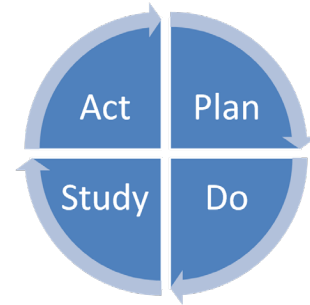
THE DMAIC PROJECT METHODOLOGY:

- A. **Define:** The process starts by clearly understanding the problem or issue at hand. Next, the team strives to understand the voice of the customer. A clear understanding of customer expectations provides a platform for determining elements that are critical to quality. Then critical to quality goals can be established that will exceed customer expectations. By establishing goals that are customer centric, the organization stands to gain the most return on investment from the efforts of its team.



- B. **Measure:** The measure phase of a project involves assessing current performance of critical to quality metrics and the establishment of a clear and understandable baseline. Often the process of assessing current process performance involves an evaluation of the accuracy and precision of currently available data. This upfront attention to measure accuracy and precision eliminates problems that can result at later stages of the process related to misinterpretation or inaccuracy of data.
- C. **Analyze:** Once the team has established a clear and understandable baseline that is accurate and appropriately precise for the project at hand, the team is ready to consider changes that can be made to the variables that are most responsible for producing outputs. In this stage, effort is given to identifying cause and effect relationships with the goal of identifying the factors/variables that are most influential in producing the desired output.
- D. **Improve:** During the improve phase, the PDSA (Plan, Do, Study, Act) model can be used to implement and evaluate improvements.

1. **Plan** - Understanding of the process gleaned from the analyze phase is used to make planned changes to the process.
 2. **Do** – Such changes should be implemented as a pilot test or designed experiment.
 3. **Study** - As a means of assessing the efficacy of changes made to the process, post-change performance is assessed and compared to baseline performance. This can be done with pre and post comparison of control charts or more advanced statistical methods.
 4. **Act** – Finally, adjustments are made as necessary and then changes are implemented system-wide.
 - a. The PDSA cycle continues to be repeated until the desired actions are achieved.
- E. **Control:** Once improvements have been made to a given process, control mechanisms are put in place to insure sustainability of desired results. Tools such as statistical process control charts are used to detect the future state of any deviations from target and to allow for rapid correction before they result in adverse or undesired outcomes.



Responsibilities of Key Stakeholders



- A. The path to excellence is a model for building an EMS system that minimizes occurrences of clinical variance and need for disciplinary actions by focusing on hiring the best employees and developing an open system of performance measurement and evaluation, provider feedback, system participation, and standardized processes.
- B. The following outlines the activities required of various participants at each stage of the Path to Excellence.
 - 1. The EMS Agency is responsible for development, implementation, and monitoring of the overall comprehensive quality improvement plan (EQIP – EMS Path to Excellence).
 - 2. The comprehensive plan EQIP – EMS Path to Excellence is comprised of seven steps. Listed below are the stakeholder responsibilities of each step.
 - 3. In addition to the comprehensive EQIP, each provider agency is required to have its own quality improvement plan.
 - 4. Each year the EQIP will review quality improvement efforts and will update all stakeholders on quality improvement efforts.

C. EMS Agency

1. Step 1 - Hire the Best Employees
 - a. Ensure the EMS Agency provides all individuals involved in quality improvement with the requisite quality improvement education and training needed to perform their respective roles.
 - b. Certify/authorize prehospital personnel.
 - c. Communicate educational and training needs to the appropriate training venues.
 - d. Approve prehospital education and training programs.
 - e. Evaluate the impact of education/training activities on EMS performance.
 - f. Support provider agencies in the implementation of quality plans.
2. Step 2 - Set and Communicate Standards of Performance
 - a. Develop a comprehensive EQIP.
 - b. Educate stakeholders on their respective role in the EQIP.
 - c. Provide education and training on quality improvement to stakeholders.
 - d. Ensure the EMS Agency adheres to all local, state and federal regulations.
 - e. Coordinate quality improvement committees.
3. Step 3 - Measure Performance
 - a. Aggregate key performance indicator data on a monthly basis.
 - b. Develop and present statistical process control charts of system performance for all three types of performance indicators.
 - Rule indicators
 - Key Performance Indicators
 - EMS Systems Variance

-
4. Step 4 - Provide Periodic Feedback
 - a. Provide statistical process control chart feedback to each provider agency monthly.
 - b. Provide updates on system performance for the various quality committee meetings.
 - c. Provide continuous updates to the medical director.
 - d. Support the medical director in reviewing annual performance and in creating periodic and annual updates.

 5. Step 5 - Manage Systems and Processes
 - a. Investigate special cause variation.
 - b. Charter and facilitate quality improvement project teams aimed at improving key system processes.
 - c. Support provider agencies in the implementation of improvement efforts.
 - d. Provide real-time system support for:
 - Multi-casualty situations.
 - Periods of excessive hospital bypass.
 - Periods of prolonged hospital ambulance patient offload times.

 6. Step 6 - Manage Poor Individual-Level Performance
 - a. Approve individual improvement/development plans for poor performers.
 1. EMS provider agencies will work in conjunction with the EMS medical Step 7 - Take Individual-Level Corrective Actions
 - b. As a last resort and in situations involving gross negligence, the EMS Medical Director will assist EMS provider agencies with corrective actions and referrals to EMSA, as deemed appropriate.
 - director to execute performance improvement plans.

D. Communications/Dispatch

1. Step 1 - Hire the Best Employees
 - a. Provide new employee orientation that sets the standard for performance.
 - b. Provide continuing education/training that integrated the knowledge gleaned from all performance improvement activities.
 - c. Maintain current certifications
2. Step 2 - Set and Communicate Standards of Performance
 - a. Participate in quality improvement committees as appointed.
 - b. Ensure that all policies, procedures and protocols comply with local, state and federal regulation and standards.
 - c. Make changes to internal performance standards as needed to support system performance.
3. Step 3 - Measure Performance
 - a. Develop system performance indicators based on:
 - High-risk
 - High-volume
 - Agency requirements and improvement efforts
 - In-house improvement efforts
 - Develop individual performance indicators based on
 - Tape reviews
 - EMD QI Software
 - National Standards
4. Step 4 - Provide Periodic Feedback
 - a. Provide system performance feedback to all dispatch personnel.
 - b. Provide individual performance feedback to all dispatch personnel.
 - c. Communicate system changes to all dispatch personnel.
 - d. Provide performance indicator data to EMS Agency on a monthly basis.

5. Step 5 - Manage Systems and Processes
 - a. Participate in quality improvement projects.
 - b. Participate in incident reviews.
6. Step 6 - Manage Poor Individual-Level Performance
 - a. Develop individual performance improvement/development plans for individuals with performance found to be statistically different than system performance.
7. Step 7 - Take Individual-Level Corrective Actions
 - a. As a last step take individual corrective action as outlined in Policy #106.

E. EMS Provider Agencies

1. Step 1 - Hire the Best Employees
 - a. Provide new employee orientation that sets the standard for quality performance.
 - b. Provide continuing education/training that integrates the knowledge garnered from all performance improvement activities.
 - c. Maintain current status on all certifications required by Santa Clara County. These requirements can be found on the EMS Agency's website under the EMT Certification and Paramedic Accreditation tab.
 - d. Designate an individual as the primary quality improvement contact.
2. Step 2 - Set and Communicate Standards of Performance
 - a. Participate in quality improvement committees as appointed.
 - b. Ensure that all policies, procedures, and protocols comply with local, state and federal regulation and standards.
 - c. Make changes to internal performance standards as needed to support the EMS system's performance.
3. Step 3 - Measure Performance
 - a. Develop system performance indicators based on:
 - High-risk
 - High-volume
 - Agency requirements and improvement efforts
 - In-house improvement efforts

-
- b. Develop individual performance indicators based on:
 - Patient charting
 - Patient care
 - High-risk
 - High-volume
 - c. Evaluate system and individual performance through:
 - Review of ePCRs
 - Ride-alongs
 - Routine testing
 - d. Review variances/unusual events in care that are detected through:
 - ePCR Review
 - Employee concerns
 - Management concerns
 - Public concerns
- 4. Step 4 - Provide Periodic Feedback**
- a. Provide feedback to hospitals and base hospital as needed to facilitate patient outcome follow-up.
 - b. Provide system performance feedback to all provider agency personnel.
 - c. Provide individual performance feedback to all provider agency personnel.
 - d. Communicate system changes to all provider agency personnel.
 - e. Provide performance indicator data to EMS Agency on a monthly basis.
 - f. Supervisors and QI personnel should provide real-time feedback to agency personnel on performance.
 - g. Provide training education to EMS providers and the community
 - h. Address deficiencies in policy and protocol identified through the CQI process.
- 5. Step 5 - Manage Systems and Processes**
- a. Participate in quality improvement projects.
 - b. Participate in incident reviews.

- c. Participate in the quality review process.
- 6.** Step 6 - Manage Poor Individual-Level Performance
 - a. Develop individual performance improvement/development plans for individuals.
- 7.** Step 7 - Take Individual-Level Corrective Actions
 - a. As a last step take individual corrective action as outlined in Policy #106.

F. Receiving Facilities

1. Step 1 - Hire the Best Employees
 - a. Provide new employee orientation to medical facility.
 - b. Provide recommendations on the orientation of new employees.
 - c. Provide recommendations on continuing education/training objectives that integrate the knowledge gleaned from all performance improvement activities.
2. Step 2 - Set and Communicate Standards of Performance
 - a. Participate in quality improvement committees as appointed.
 - b. Ensure that all policies, procedures, and protocols comply with local, state and federal regulation and standards.
 - c. Make changes to internal performance standards as needed to support system performance.
3. Step 3 - Measure Performance
 - a. Track patient outcomes.
4. Step 4 - Provide Periodic Feedback
 - a. Provide feedback to base hospital and provider agencies as needed to facilitate patient outcome follow-up.
 - b. Provide performance feedback to quality committees as necessary.
 - c. Report unusual event/variance to the appropriate provider agency and EMS Agency.
5. Step 5 - Manage Systems and Processes
 - a. Participate in quality improvement projects.
 - b. Participate in incident reviews.
6. Step 6 - Manage Poor Individual-Level Performance
 - a. Support provider agencies as needed with individual improvement/development plans.
7. Step 7 - Take Individual-Level Corrective Actions
 - b. Support provider agencies as necessary.

G. Base Hospital

1. Step 1 - Hire the Best Employees
 - a. Provide orientation to new base hospital physicians setting the standard for performance.
 - b. Provide continuing education/training that integrates the knowledge collected from all performance improvement activities.
 - c. Offer supervised clinical rotations for paramedics.
 - d. Participate in the continuing education/training of prehospital personnel.
 - e. Designate an individual as the primary quality improvement contact.
 - f. Develop requirements for base hospital physician authorization and training.
2. Step 2 - Set and Communicate Standards of Performance
 - a. Participate in quality improvement committees as appointed.
 - b. Ensure that all policies, procedures, and protocols comply with local, state and federal regulation and standards.
 - c. Make changes to base hospital performance standards as needed to support system performance.
3. Step 3 - Measure Performance
 - a. Develop system performance indicators based on:
 - High-risk
 - High-volume
 - Agency requirements and improvement efforts
 - In-house improvement efforts
 - b. Develop individual performance indicators based on:
 - High-risk
 - High-volume
 - Agency requirements and improvement efforts
 - In-house improvement efforts
 - c. Evaluate system and individual performance through:
 - Written record

- Recorded communications
- d. Assist in the review of unusual events/variances in care that are detected through:
 - Complaints
 - Reviews
 - Adverse outcomes
- 4. Step 4 - Provide Periodic Feedback
 - a. Provide feedback to provider agencies and hospital as needed to facilitate patient outcome follow-up.
 - b. Provide system performance feedback to all base hospital personnel.
 - c. Provide individual performance feedback to all base hospital physicians personnel.
 - d. Communicate system changes to all base hospital personnel.
 - e. Provide performance indicator data to EMS Agency on a monthly basis.
- 5. Step 5 - Manage Systems and Processes
 - a. Participate in quality improvement projects.
 - b. Participate in incident reviews.
- 6. Step 6 - Manage Poor Individual-Level Performance
 - a. Develop individual performance improvement/development plans for individuals with performance found to be statistically different than system performance.
- 7. Step 7 - Take Individual-Level Corrective Actions
 - a. As a last step take individual corrective action.

SYSTEM-WIDE KEY PERFORMANCE INDICATORS

Santa Clara County's performance indicators are measures based on scientific evidence about processes and treatments thought to produce the best results for a condition or illness. Quality improvement is a continuous process that requires continual monitoring and activity to maintain a given level of quality and to continuously strive to improve performance in all areas. Being a dynamic and continuous process, there is the need to update quality goals annually. Respectively, there is the need to evaluate performance indicators and core

measures. Changes to the performance indicators will be made annually as part of the Annual Update process through the Prehospital Care System Quality Improvement Committee (PCSQIC) and/or EMS Agency.

A. On an annual basis the QI program will:

- 1) Determine if new performance indicators need to be added.
- 2) Determine if any performance indicators need to be retired or adjusted.
- 3) Publish a list of revised indicators in the Annual Update Document.

B. Performance indicator definitions should only be changed, when necessary, as the changes to definitions of core measure detracts from the ability to compare current performance to historical performance.

C. Performance Indicator Selection

Performance indicators are created to continually monitor key processes within the Santa Clara EMS System. Each year the Prehospital Care System Quality Improvement Committee (PCSQIC) reviews the performance indicators that are being collected, and determines whether new performance indicators need to be collected and evaluated. The need for new performance indicators could arise from one of two perspectives.

1. An improvement project may lead to the discovery of a new leading performance indicator. Leading performance indicators are those that if performed correctly lead to desired outcomes. An example of a leading indicator is the time from onset of cardiac arrest until an initial shock is delivered. Evidence supports the notion that the shorter this time interval the higher probability of a desirable patient outcome.
2. A second situation is the situation in which a new outcome is determined to be important to the overall service and care provided to the people of Santa Clara County.

D. Clinical Indicator Reporting

The quality improvement unit of each prehospital provider agency will collect and aggregate the data needed to evaluate each of the performance indicators based on the care that its personnel renders to patients. Using Image Trend reports authored or vetted through the EMS agency or an Excel spreadsheet template author or vetted by the EMS Agency; each provider agency will submit the required information for the clinical indicator currently in use to the EMS Agency, monthly. The clinical indicator information is due to Santa Clara County EMS Agency by the 15th business day after the end of the month.

E. Agency Review of Performance Indicators

The EMS Agency epidemiologist will review and validate the data and place in the appropriate statistical process control chart. Special cause variation and/or processes that are not meeting performance standards will be discussed at the quarterly meetings of the Prehospital Care System Quality Improvement Committee. The EMS Agency will also provide copies of the statistical process control charts created from each provider's data back to the given provider agency. In addition to the required performance indicators, the quality improvement unit of each local EMS provider is encouraged to develop their own performance indicators to evaluate unique aspects of their individual organization.

F. Evaluation of Performance Indicators

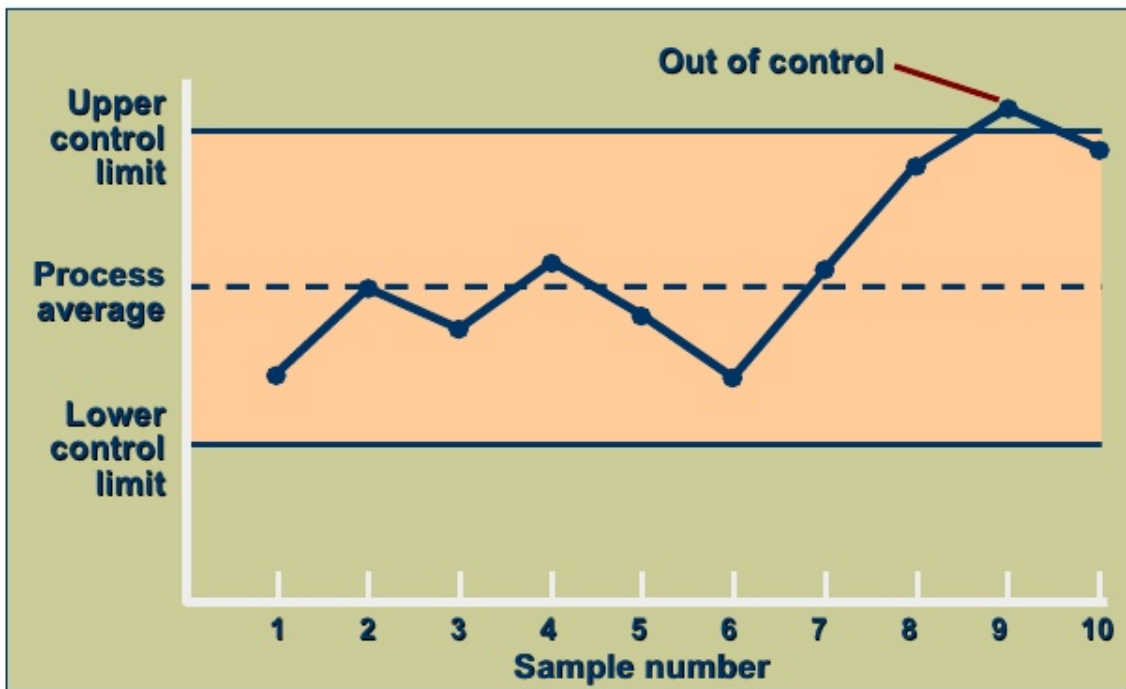
The Quality Improvement Unit will review each statistical process control chart. Out-of-control process and/or processes that are not meeting performance standards will be discussed at the quarterly meetings of the Prehospital Care System Quality Improvement Committee. Each prehospital provider should investigate out-of-control data points and should provide their findings at the bimonthly meeting.

INTRODUCTION STATISTICAL PROCESS CONTROL CHARTS

- A. The statistical process control chart or "process behavior chart" is used to monitor processes over time. The theoretical basis is that work happens over time in the context of a process. Process data collected on such processes should produce a predictable range of data. This range is used to determine natural process boundaries. If data falls outside of these statistically derived boundaries, then there is a high probability that there has been a change in a process. This phenomenon is known as "out-of-control." When a data point falls off these boundaries or control limits, the process is said to be out-of-control and the process that results in the data point should be investigated. If the process is not out of control and is not meeting given standards, then all data from the process should be evaluated in aggregate to determine sources of common cause variation.
- B. It is important to remember that out-of-control and "out of standard" are two entirely different phenomena. The approach on how to intervene in these two distinct situations is very different. When a process is in a state of control and is not producing outputs at a desirable level, a process often referred to as common cause variation, then improvement efforts should be targeted at improving or redesigning the entire process, such that it produces desired outcomes. Alternatively, if a process is just out-of-control or is experiencing what is referred to as special cause variation, then it is appropriate to investigate the out-of-control points and to institute appropriate changes to prevent such special causes in the future.

- C. There are three important components of a control or process behavior chart. These include the centerline, the upper control limit, and the lower control limit. The centerline represents the central tendency of the range of process data. Often, this is the average level of performance of a process. The second component is the upper control limit. The upper control limit represents the upper boundary of data that is within the range of a given process performance. Points that fall beyond this upper control limit or boundary have a high probability of coming from an alternative process. Simply meaning that there is a high probability that the series of steps that were carried out were altered in some manner. This could have resulted from any number of reasons from an employee doing the process incorrectly or from an adverse environment influencing the processes output. The final component is the lower control limit (LCL) or boundary and operates exactly like the upper control limits. Points falling below this level have a high probability of being produced by an altered process.
- D. The following is an example of a control chart. Statistical process control charts (process behavior charts) are the most sophisticated way to monitor process indicators over time. While there are different types of control charts to accommodate different forms of data, all control charts have the same three essential components outlined above.

Process Control Chart



E. Using Performance Improvement Data

Process owners are responsible for continuously monitoring processes with control charts and for presenting a review of them to the appropriate oversight committee. Out-of-control points should be evaluated by the process owner and appropriate actions should be instituted to prevent such deviations from the process in the future. If a process is found to be in “control” but is not meeting a particular standard, then the process owner should present such findings to the Prehospital Care System Quality Improvement Committee (PCSQIC), who should also consider charting a quality improvement project to facilitate improvement of the process.

POLICY REVIEW PROCESS**A. Introduction**

The policy review process is an advisory process to the EMS Agency and the EMS medical director for the formulation of medical protocols and operational policies. Policy suggestions and/or draft policies are accepted from committees, system participants, individuals, and/or interested parties.

Policies will be evaluated on an annual basis with adequate time allowed for training and distribution. Specific recommendations for additions, deletions, and/or revisions should be forwarded to the EMS Agency.

B. Policy Process**1. Written Public Comment**

- a. The EMS office will distribute draft policies to the appropriate system participants and/or interested parties for written comments.
- b. Policies under consideration that affect the EMS system will be sent out for review by all systems participants. A policy under consideration that applies to a limited group will only be sent to those who would be directly affected.
- c. The time frame allowed for the return of comments will be 30 days. Comments may be emailed to the EMS office but must be received no later than 5:00 p.m. on the deadline date.

All comments will be reviewed by the EMS Medical Director and EMS Agency Staff. All suggestions will be taken into consideration.

C. TRAINING AND EDUCATION**1. Paramedic and EMT Training Programs**

Paramedic and EMT training programs are approved and monitored in accordance with the California Code of Regulations, Title 22, Division 9, Chapter 2, Article 3 and Chapter 4, Article 3. Training programs receive EMS education initiatives associated with treatment protocol updates and quality improvement activities.

2. Continuing Education (CE) Title 22. Division 9. Chapter 11

Training and education are fundamental to the success of quality improvement and is addressed in collaboration with quality and training experts from all our partners throughout the EMS system. CE training program objectives are designed to:

- a. Meet state licensure/certification requirements and/or county accreditation requirements.
- b. Be developed with educational content to address Santa Clara County specific needs.

- c. Provide standards-based training for all fire and ambulance personnel.
- d. Integrate prehospital skills/CE training into a countywide system.
- e. Utilize patient simulator training countywide to achieve training objectives.
- f. Improve and integrate “partners” in ALS/BLS training.
- g. Facilitate increased interagency training to promote cooperation and respect.

D. ANNUAL UPDATE

The medical director will oversee an annual evaluation of the QI program annually by the EMS Agency, various committees and stakeholders. An annual update will be created to inform, educate and train all individuals involved in QI activities. At a minimum this will include the following:

- 1. Update on new performance indicators.
- 2. Review key improvements from the previous year.
- 3. Review current important data and any special cause variations trends.
- 4. A review of any policy revisions.
- 5. A description of any changes in continuing education and skills training requirements.
- 6. A description of priorities for the coming year.

The annual update document is a written account of the progress of an organization’s activities as stated in the EMS QI Program. The plan will summarize previous year’s changes and progress. The annual update will include the indicators monitored, key findings/priority issues identified, improvement action plan/plans for further action, and state whether goals were met. If goals were not met, what follow-up actions are needed, if any. The update shall include, but not be limited to, a summary of how the EQIP addressed the program indicators. The EQIP shall be reviewed by the LEMSA or the EMSA at least every five (5) years.

2020 Key Performance Indicators



Performance Indicator	Objective	Frequency	Indicator Selection	Indicator Reported to
Midazolam Usage and Performance	Surveillance of medication/usage efficacy	Daily	PCSQIC	PCSQIC
IV Acetaminophen Performance	Surveillance of trial medication efficacy	Daily	PCSQIC	PCSQIC
Pediatric Respiratory Assessment	State Core Measure Surveillance	Daily	PCSQIC	PCSQIC/State Core Measure
Trauma (Best Practices)	Surveillance of trauma best practices	Daily	PCSQIC	PCSQIC
ACS (Best Practices)	Surveillance of cardiac best practices	Daily	PCSQIC	PCSQIC
Stroke (Best Practices)	Surveillance of stroke best practices	Daily	PCSQIC	PCSQIC
Base Station Performance	Call review for protocol adherence	Daily	PCSQIC	PCSQIC
Cardiac Arrest (ROSC)	Surveillance of return of spontaneous circulation in cardiac arrest patients and outcomes	Monthly	EMS Agency	Board of Supervisors
Ambulance Patient Offload Time (APOT)	Surveillance of transition of care and patient offload times	Monthly	EMS Agency	Board of Supervisors State of California
Electronic Patient Care Record Documentation	Surveillance of patient care record validation scores (at least 80 points out of 100)	Monthly	EMS Agency	Board of Supervisors
Timely Submission of PCRs for Time Sensitive Injuries	Surveillance of patient care record submission for specialty care patients	Monthly	EMS Agency	Board of Supervisors
Trauma Scene Time Reduction	Surveillance of trauma scene times exceeding 15 minutes	Monthly	EMS Agency	Board of Supervisors
Domestic Violence EMS Response	Surveillance of domestic violence patients assessed by EMS provider	Monthly	Board of Supervisors	Board of Supervisors
Community Paramedicine Pilot (Alternate Destination)	Surveillance of patients assessed for pilot entry/exclusion	Monthly	State of California	State of California
LMA Performance	Surveillance of LMA usage, success rates and performance (local optional scope)	Monthly	State of California	State of California

Summary

Santa Clara County EMS is guided by its mission: an essential service dedicated to ensuring the provision of quality patient care to the people of Santa Clara County through collaboration, facilitated regulation and system management.

Our EMTs, Paramedics, support staff, and leadership strive to model and support the agencies' core values of dignity, respect, innovation, professionalism, objectivity, leadership, and participation in all of their actions. The product being the culmination of a comprehensive vision, assuring an EMS system in Santa Clara County that provides safe, quality, and effective prehospital care.

The past year has allowed the Santa Clara EMS Agency the opportunity to further affirm our commitment and dedication to the community we serve. As a service, we continue to develop deep bonds in the neighborhoods of Santa Clara, not only in the delivery of pre-hospital emergency medical care, but through science-based protocols and community outreach programs.



TABLE 4: RESPONSE AND TRANSPORTATION

CY2020

Provider Resource

NASA-Ames Fire Department [provided by Fiore Industries, Inc.]

County: Santa Clara **Provider:** _____ **Response Area:** Santa Clara County

Address: 580 Zook Road
Moffett Field, CA 94035

Phone Number: 650.604.5416

Number of Ambulances, Air Rescue, or Air Ambulance Vehicles in fleet: _____ 0

Average number of Ambulances and/or Air Rescue Vehicles/Air Ambulances on duty at 12:00 p.m. (noon) on any given day: _____ 0

Number of Non-Ambulance Medical Transport Litter Vans (gurney van) and/or wheelchair vans: _____ 0

Ambulance Strike Team Participant: Yes No

Number of Helicopters based in this LEMSA's jurisdiction: _____ 0

Written ALS Agreement with LEMSA to Participate in EMS System: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Medical Director: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	System Available 24 Hours: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Level of Service:			
			<input type="checkbox"/> Transport <input checked="" type="checkbox"/> Non-Transport	<input type="checkbox"/> ALS <input type="checkbox"/> LALS <input checked="" type="checkbox"/> BLS	<input type="checkbox"/> 9-1-1 <input checked="" type="checkbox"/> 7-Digit <input type="checkbox"/> CCT <input type="checkbox"/> IFT	<input type="checkbox"/> Ground <input type="checkbox"/> Air
		<input type="checkbox"/> Non-Ambulance Medical Transport Services		<input type="checkbox"/> Litter/Gurney Van	<input type="checkbox"/> Wheelchair Van	



TABLE 4: RESPONSE AND TRANSPORTATION

Ownership: <input type="checkbox"/> Public <input checked="" type="checkbox"/> Private	If Public: <input type="checkbox"/> Fire <input type="checkbox"/> Law <input type="checkbox"/> Other _____	If Public: <input type="checkbox"/> City <input type="checkbox"/> State <input type="checkbox"/> Federal	<input type="checkbox"/> County <input type="checkbox"/> Fire District	If Air: <input type="checkbox"/> Rotary <input type="checkbox"/> Fixed Wing	Air Classification: <input type="checkbox"/> Auxiliary Rescue <input type="checkbox"/> Air Ambulance <input type="checkbox"/> ALS Rescue <input type="checkbox"/> BLS Rescue
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Provider Resource (cont.)

CEMSIS Provider ID #: S43-51113

Name of ePCR Vendor: ImageTrend

Contract Dates: N/A; No agreement executed.

Ground Non-Transporting and/or Transporting Agencies

30 Total number of responses
30 Number of emergency responses
0 Number of non-emergency responses

Ground Transporting Agencies

0 Total number of transports
0 Number of emergency transports
0 Number of non-emergency transports

Air Transporting Services

0 Total number of responses
0 Number of emergency responses
0 Number of non-emergency responses

0 Total number of transports
0 Number of emergency transports
0 Number of non-emergency transports

Provider Staff Information

Total number of certified EMTs in the field: 39

Total number of certified Advanced EMTs in the field: 0

Total number of certified/accredited Paramedics in the field: 0



TABLE 4: RESPONSE AND TRANSPORTATION

CY2020

Provider Resource

American Medical Response; subsidiary of Global Medical Response

County: Santa Clara **Provider:** _____ **Response Area:** Santa Clara

Address: 13992 Catalina Street
San Leandro, CA 94577

Phone Number: 855.788.8370 / 530.457.5062

Number of Ambulances, Air Rescue, or Air Ambulance Vehicles in fleet: _____ 6

Average number of Ambulances and/or Air Rescue Vehicles/Air Ambulances on duty at 12:00 p.m. (noon) on any given day: _____ 3

Number of Non-Ambulance Medical Transport Litter Vans (gurney van) and/or wheelchair vans: _____ 2

Ambulance Strike Team Participant: Yes No

Number of Helicopters based in this LEMSA's jurisdiction: _____ 0

Written ALS Agreement with LEMSA to Participate in EMS System: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Medical Director: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	System Available 24 Hours: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Level of Service:			
			<input checked="" type="checkbox"/> Transport <input type="checkbox"/> Non-Transport	<input type="checkbox"/> ALS <input type="checkbox"/> LALS <input checked="" type="checkbox"/> BLS	<input type="checkbox"/> 9-1-1 <input checked="" type="checkbox"/> 7-Digit <input checked="" type="checkbox"/> CCT <input checked="" type="checkbox"/> IFT	<input checked="" type="checkbox"/> Ground <input type="checkbox"/> Air
			<input type="checkbox"/> Non-Ambulance Medical Transport Services	<input type="checkbox"/> Litter/Gurney Van	<input checked="" type="checkbox"/> Wheelchair Van	



TABLE 4: RESPONSE AND TRANSPORTATION

Ownership: <input type="checkbox"/> Public <input checked="" type="checkbox"/> Private	If Public: <input type="checkbox"/> Fire <input type="checkbox"/> Law <input type="checkbox"/> Other _____	If Public: <input type="checkbox"/> City <input type="checkbox"/> State <input type="checkbox"/> Federal	<input type="checkbox"/> County <input type="checkbox"/> Fire District	If Air: <input type="checkbox"/> Rotary <input type="checkbox"/> Fixed Wing	Air Classification: <input type="checkbox"/> Auxiliary Rescue <input type="checkbox"/> Air Ambulance <input type="checkbox"/> ALS Rescue <input type="checkbox"/> BLS Rescue
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Provider Resource (cont.)

CEMSIS Provider ID #: S44-50088

Name of ePCR Vendor: MEDS

Contract Dates: 07/01/2019 to 06/30/2024

Ground Non-Transporting and/or Transporting Agencies

<u>245</u>	Total number of responses
<u>0</u>	Number of emergency responses
<u>245</u>	Number of non-emergency responses

Ground Transporting Agencies

<u>245</u>	Total number of transports
<u>0</u>	Number of emergency transports
<u>245</u>	Number of non-emergency transports

Air Transporting Services

<u>0</u>	Total number of responses
<u>0</u>	Number of emergency responses
<u>0</u>	Number of non-emergency responses

<u>0</u>	Total number of transports
<u>0</u>	Number of emergency transports
<u>0</u>	Number of non-emergency transports

Provider Staff Information

Total number of certified EMTs in the field: 110

Total number of certified Advanced EMTs in the field: 0

Total number of certified/accredited Paramedics in the field: 0



TABLE 4: RESPONSE AND TRANSPORTATION

CY2020

Provider Resource

County: Santa Clara **Provider:** ProTransport-1 **Response Area:** Santa Clara County

Address: 720 Portal Street, Cotati, CA 94931
498 Sapena Ct; Santa Clara, CA 95054

Phone Number: 800.650.4003

Number of Ambulances, Air Rescue, or Air Ambulance Vehicles in fleet: 26

Average number of Ambulances and/or Air Rescue Vehicles/Air Ambulances on duty at 12:00 p.m. (noon) on any given day: 8

Number of Non-Ambulance Medical Transport Litter Vans (gurney van) and/or wheelchair vans: 1

Ambulance Strike Team Participant: Yes No

Number of Helicopters based in this LEMSA's jurisdiction: 0

Written ALS Agreement with LEMSA to Participate in EMS System: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Medical Director: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	System Available 24 Hours: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Level of Service:			
			<input checked="" type="checkbox"/> Transport <input type="checkbox"/> Non-Transport	<input checked="" type="checkbox"/> ALS <input type="checkbox"/> LALS <input checked="" type="checkbox"/> BLS	<input type="checkbox"/> 9-1-1 <input checked="" type="checkbox"/> 7-Digit <input checked="" type="checkbox"/> CCT <input checked="" type="checkbox"/> IFT	<input checked="" type="checkbox"/> Ground <input type="checkbox"/> Air
		<input type="checkbox"/> Non-Ambulance Medical Transport Services		<input type="checkbox"/> Litter/Gurney Van	<input checked="" type="checkbox"/> Wheelchair Van	



TABLE 4: RESPONSE AND TRANSPORTATION

Ownership: <input type="checkbox"/> Public <input checked="" type="checkbox"/> Private	If Public: <input type="checkbox"/> Fire <input type="checkbox"/> Law <input type="checkbox"/> Other _____	If Public: <input type="checkbox"/> City <input type="checkbox"/> State <input type="checkbox"/> Federal	<input type="checkbox"/> County <input type="checkbox"/> Fire District	If Air: <input type="checkbox"/> Rotary <input type="checkbox"/> Fixed Wing	Air Classification: <input type="checkbox"/> Auxiliary Rescue <input type="checkbox"/> Air Ambulance <input type="checkbox"/> ALS Rescue <input type="checkbox"/> BLS Rescue
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Provider Resource (cont.)

CEMSIS Provider ID #: S43-50771

Name of ePCR Vendor: ImageTrend

Contract Dates: 07/01/2019 to 06/30/2024

Ground Non-Transporting and/or Transporting Agencies

5,368 Total number of responses
15 Number of emergency responses
5,353 Number of non-emergency responses

Ground Transporting Agencies

5,339 Total number of transports
18 Number of emergency transports
5,321 Number of non-emergency transports

Air Transporting Services

0 Total number of responses
0 Number of emergency responses
0 Number of non-emergency responses

0 Total number of transports
0 Number of emergency transports
0 Number of non-emergency transports

Provider Staff Information

Total number of certified EMTs in the field: 71

Total number of certified Advanced EMTs in the field: 0

Total number of certified/accredited Paramedics in the field: 13



TABLE 4: RESPONSE AND TRANSPORTATION

CY2020

Provider Resource

County:	<u>Santa Clara</u>	Provider:	<u>United Ambulance</u>	Response Area:	<u>Santa Clara County</u>
Address:	<u>3530 Breakwater Court</u> <u>Hayward, CA 94545</u>	Number of Ambulances, Air Rescue, or Air Ambulance Vehicles in fleet:		<u>3</u>	
Phone Number:	<u>510.671.0031</u>	Average number of Ambulances and/or Air Rescue Vehicles/Air Ambulances on duty at 12:00 p.m. (noon) on any given day:		<u>1</u>	
		Number of Non-Ambulance Medical Transport Litter Vans (gurney van) and/or wheelchair vans:		<u>5</u>	
Ambulance Strike Team Participant:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Number of Helicopters based in this LEMSA's jurisdiction:		<u>0</u>	

Written ALS Agreement with LEMSA to Participate in EMS System: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Medical Director: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	System Available 24 Hours: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Level of Service:			
			<input checked="" type="checkbox"/> Transport <input type="checkbox"/> Non-Transport	<input type="checkbox"/> ALS <input type="checkbox"/> LALS <input checked="" type="checkbox"/> BLS	<input type="checkbox"/> 9-1-1 <input checked="" type="checkbox"/> 7-Digit <input type="checkbox"/> CCT <input checked="" type="checkbox"/> IFT	<input checked="" type="checkbox"/> Ground <input type="checkbox"/> Air
			<input type="checkbox"/> Non-Ambulance Medical Transport Services	<input checked="" type="checkbox"/> Litter/Gurney Van	<input type="checkbox"/> Wheelchair Van	



TABLE 4: RESPONSE AND TRANSPORTATION

Ownership: <input type="checkbox"/> Public <input checked="" type="checkbox"/> Private	If Public: <input type="checkbox"/> Fire <input type="checkbox"/> Law <input type="checkbox"/> Other _____	If Public: <input type="checkbox"/> City <input type="checkbox"/> State <input type="checkbox"/> Federal	<input type="checkbox"/> County <input type="checkbox"/> Fire District	If Air: <input type="checkbox"/> Rotary <input type="checkbox"/> Fixed Wing	Air Classification: <input type="checkbox"/> Auxiliary Rescue <input type="checkbox"/> Air Ambulance <input type="checkbox"/> ALS Rescue <input type="checkbox"/> BLS Rescue
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Provider Resource (cont.)

CEMSIS Provider ID #: S43-51939

Name of ePCR Vendor: Zoll

Contract Dates: 07/20/2020 to 06/30/2024

Ground Non-Transporting and/or Transporting Agencies

250 Total number of responses
0 Number of emergency responses
250 Number of non-emergency responses

Ground Transporting Agencies

250 Total number of transports
0 Number of emergency transports
250 Number of non-emergency transports

Air Transporting Services

0 Total number of responses
0 Number of emergency responses
0 Number of non-emergency responses

0 Total number of transports
0 Number of emergency transports
0 Number of non-emergency transports

Provider Staff Information

Total number of certified EMTs in the field: 30
 Total number of certified Advanced EMTs in the field: 0
 Total number of certified/accredited Paramedics in the field: 0



TABLE 4: RESPONSE AND TRANSPORTATION

CY2020

Provider Resource

County: <u>Santa Clara</u>	Provider: <u>Falcon Critical Care Transport</u>	Response Area: <u>Santa Clara County</u>
Address: <u>3508 San Pablo Dam Road; El Sobrante, CA 94803</u> <u>154 San Laranzo Blvd; Sunnyvale, CA 94086</u>	Number of Ambulances, Air Rescue, or Air Ambulance Vehicles in fleet:	<u>11</u>
Phone Number: <u>510.223.1171</u>	Average number of Ambulances and/or Air Rescue Vehicles/Air Ambulances on duty at 12:00 p.m. (noon) on any given day:	<u>8</u>
Ambulance Strike Team Participant: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Number of Non-Ambulance Medical Transport Litter Vans (gurney van) and/or wheelchair vans:	<u>0</u>
	Number of Helicopters based in this LEMSA's jurisdiction:	<u>0</u>

Written ALS Agreement with LEMSA to Participate in EMS System: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Medical Director: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	System Available 24 Hours: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Level of Service: <input checked="" type="checkbox"/> Transport <input type="checkbox"/> ALS <input type="checkbox"/> 9-1-1 <input checked="" type="checkbox"/> Ground <input type="checkbox"/> Non-Transport <input type="checkbox"/> LALS <input checked="" type="checkbox"/> 7-Digit <input type="checkbox"/> Air <input checked="" type="checkbox"/> BLS <input checked="" type="checkbox"/> CCT <input checked="" type="checkbox"/> IFT Other Specialty Services (water, snow, etc.): _____ _____ <input type="checkbox"/> Non-Ambulance Medical Transport Services <input type="checkbox"/> Litter/Gurney Van <input type="checkbox"/> Wheelchair Van
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TABLE 4: RESPONSE AND TRANSPORTATION

Ownership: <input type="checkbox"/> Public <input checked="" type="checkbox"/> Private	If Public: <input type="checkbox"/> Fire <input type="checkbox"/> Law <input type="checkbox"/> Other _____	If Public: <input type="checkbox"/> City <input type="checkbox"/> State <input type="checkbox"/> Federal	<input type="checkbox"/> County <input type="checkbox"/> Fire District	If Air: <input type="checkbox"/> Rotary <input type="checkbox"/> Fixed Wing	Air Classification: <input type="checkbox"/> Auxiliary Rescue <input type="checkbox"/> Air Ambulance <input type="checkbox"/> ALS Rescue <input type="checkbox"/> BLS Rescue
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Provider Resource (cont.)

CEMSIS Provider ID #: S44-50390

Name of ePCR Vendor: Traumasoft

Contract Dates: 07/01/2019 to 06/30/2024

Ground Non-Transporting and/or Transporting Agencies

3,225 Total number of responses
0 Number of emergency responses
3,225 Number of non-emergency responses

Ground Transporting Agencies

3,225 Total number of transports
0 Number of emergency transports
3,225 Number of non-emergency transports

Air Transporting Services

0 Total number of responses
0 Number of emergency responses
0 Number of non-emergency responses

0 Total number of transports
0 Number of emergency transports
0 Number of non-emergency transports

Provider Staff Information

Total number of certified EMTs in the field: 60
 Total number of certified Advanced EMTs in the field: 0
 Total number of certified/accredited Paramedics in the field: 0



TABLE 4: RESPONSE AND TRANSPORTATION

CY2020

Provider Resource

County: Santa Clara **Provider:** Royal Ambulance **Response Area:** Santa Clara County

Address: 14676 Doolittle Drive; San Leandro, CA 94577
1151 N. 5th Street; San Jose, CA 95112

Phone Number: 510.631.1299

Ambulance Strike Team Participant: Yes No

Number of Ambulances, Air Rescue, or Air Ambulance Vehicles in fleet:	<u>39</u>
Average number of Ambulances and/or Air Rescue Vehicles/Air Ambulances on duty at 12:00 p.m. (noon) on any given day:	<u>20</u>
Number of Non-Ambulance Medical Transport Litter Vans (gurney van) and/or wheelchair vans:	<u>0</u>
Number of Helicopters based in this LEMSA's jurisdiction:	<u>0</u>

<p>Written ALS Agreement with LEMSA to Participate in EMS System:</p> <p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>	<p>Medical Director:</p> <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p>System Available 24 Hours:</p> <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p style="text-align: center;">Level of Service:</p> <table border="0" style="width: 100%;"> <tr> <td><input checked="" type="checkbox"/> Transport</td> <td><input type="checkbox"/> ALS</td> <td><input type="checkbox"/> 9-1-1</td> <td><input checked="" type="checkbox"/> Ground</td> </tr> <tr> <td><input type="checkbox"/> Non-Transport</td> <td><input type="checkbox"/> LALS</td> <td><input checked="" type="checkbox"/> 7-Digit</td> <td><input type="checkbox"/> Air</td> </tr> <tr> <td></td> <td><input checked="" type="checkbox"/> BLS</td> <td><input checked="" type="checkbox"/> CCT</td> <td></td> </tr> <tr> <td></td> <td></td> <td><input checked="" type="checkbox"/> IFT</td> <td></td> </tr> </table> <p>Other Specialty Services (water, snow, etc.): _____</p> <table border="0" style="width: 100%;"> <tr> <td><input type="checkbox"/> Non-Ambulance Medical Transport Services</td> <td><input type="checkbox"/> Litter/Gurney Van</td> <td><input type="checkbox"/> Wheelchair Van</td> </tr> </table>	<input checked="" type="checkbox"/> Transport	<input type="checkbox"/> ALS	<input type="checkbox"/> 9-1-1	<input checked="" type="checkbox"/> Ground	<input type="checkbox"/> Non-Transport	<input type="checkbox"/> LALS	<input checked="" type="checkbox"/> 7-Digit	<input type="checkbox"/> Air		<input checked="" type="checkbox"/> BLS	<input checked="" type="checkbox"/> CCT				<input checked="" type="checkbox"/> IFT		<input type="checkbox"/> Non-Ambulance Medical Transport Services	<input type="checkbox"/> Litter/Gurney Van	<input type="checkbox"/> Wheelchair Van
<input checked="" type="checkbox"/> Transport	<input type="checkbox"/> ALS	<input type="checkbox"/> 9-1-1	<input checked="" type="checkbox"/> Ground																			
<input type="checkbox"/> Non-Transport	<input type="checkbox"/> LALS	<input checked="" type="checkbox"/> 7-Digit	<input type="checkbox"/> Air																			
	<input checked="" type="checkbox"/> BLS	<input checked="" type="checkbox"/> CCT																				
		<input checked="" type="checkbox"/> IFT																				
<input type="checkbox"/> Non-Ambulance Medical Transport Services	<input type="checkbox"/> Litter/Gurney Van	<input type="checkbox"/> Wheelchair Van																				



TABLE 4: RESPONSE AND TRANSPORTATION

Ownership: <input type="checkbox"/> Public <input checked="" type="checkbox"/> Private	If Public: <input type="checkbox"/> Fire <input type="checkbox"/> Law <input type="checkbox"/> Other _____	If Public: <input type="checkbox"/> City <input type="checkbox"/> County <input type="checkbox"/> State <input type="checkbox"/> Fire District <input type="checkbox"/> Federal	If Air: <input type="checkbox"/> Rotary <input type="checkbox"/> Fixed Wing	Air Classification: <input type="checkbox"/> Auxiliary Rescue <input type="checkbox"/> Air Ambulance <input type="checkbox"/> ALS Rescue <input type="checkbox"/> BLS Rescue
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Provider Resource (cont.)

CEMSIS Provider ID #: S43-50804

Name of ePCR Vendor: Zoll

Contract Dates: 07/01/2019 to 06/30/2024

Ground Non-Transporting and/or Transporting Agencies

22,440 Total number of responses
326 Number of emergency responses
20,944 Number of non-emergency responses

Ground Transporting Agencies

22,440 Total number of transports
326 Number of emergency transports
20,944 Number of non-emergency transports

Air Transporting Services

0 Total number of responses
0 Number of emergency responses
0 Number of non-emergency responses

0 Total number of transports
0 Number of emergency transports
0 Number of non-emergency transports

Provider Staff Information

Total number of certified EMTs in the field: 158

Total number of certified Advanced EMTs in the field: 0

Total number of certified/accredited Paramedics in the field: 0



TABLE 4: RESPONSE AND TRANSPORTATION

CY2020

Provider Resource

County:	<u>Santa Clara</u>	Provider:	<u>Westmed Ambulance Service</u>	Response Area:	<u>Santa Clara County</u>
Address:	<u>14275 Wicks Blvd. San Leandro, CA 94577</u>	Number of Ambulances, Air Rescue, or Air Ambulance Vehicles in fleet:		<u>28</u>	
Phone Number:	<u>510.614.1420</u>	Average number of Ambulances and/or Air Rescue Vehicles/Air Ambulances on duty at 12:00 p.m. (noon) on any given day:		<u>10</u>	
		Number of Non-Ambulance Medical Transport Litter Vans (gurney van) and/or wheelchair vans:		<u>0</u>	
Ambulance Strike Team Participant:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Number of Helicopters based in this LEMSA's jurisdiction:		<u>0</u>	

Written ALS Agreement with LEMSA to Participate in EMS System: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Medical Director: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	System Available 24 Hours: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Level of Service:			
			<input checked="" type="checkbox"/> Transport <input type="checkbox"/> Non-Transport	<input checked="" type="checkbox"/> ALS <input type="checkbox"/> LALS <input checked="" type="checkbox"/> BLS	<input type="checkbox"/> 9-1-1 <input checked="" type="checkbox"/> 7-Digit <input checked="" type="checkbox"/> CCT <input checked="" type="checkbox"/> IFT	<input checked="" type="checkbox"/> Ground <input type="checkbox"/> Air
			<input type="checkbox"/> Non-Ambulance Medical Transport Services	<input type="checkbox"/> Litter/Gurney Van	<input type="checkbox"/> Wheelchair Van	



TABLE 4: RESPONSE AND TRANSPORTATION

Ownership: <input type="checkbox"/> Public <input checked="" type="checkbox"/> Private	If Public: <input type="checkbox"/> Fire <input type="checkbox"/> Law <input type="checkbox"/> Other _____	If Public: <input type="checkbox"/> City <input type="checkbox"/> State <input type="checkbox"/> Federal	<input type="checkbox"/> County <input type="checkbox"/> Fire District	If Air: <input type="checkbox"/> Rotary <input type="checkbox"/> Fixed Wing	Air Classification: <input type="checkbox"/> Auxiliary Rescue <input type="checkbox"/> Air Ambulance <input type="checkbox"/> ALS Rescue <input type="checkbox"/> BLS Rescue
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Provider Resource (cont.)

CEMSIS Provider ID #: S43-50876

Name of ePCR Vendor: Zoll

Contract Dates: 07/01/2019 to 06/30/2024

Ground Non-Transporting and/or Transporting Agencies

15,808 Total number of responses
2,810 Number of emergency responses
12,998 Number of non-emergency responses

Ground Transporting Agencies

15,808 Total number of transports
2,810 Number of emergency transports
12,998 Number of non-emergency transports

Air Transporting Services

0 Total number of responses
0 Number of emergency responses
0 Number of non-emergency responses

0 Total number of transports
0 Number of emergency transports
0 Number of non-emergency transports

Provider Staff Information

Total number of certified EMTs in the field: 65

Total number of certified Advanced EMTs in the field: 0

Total number of certified/accredited Paramedics in the field: 5



TABLE 4: RESPONSE AND TRANSPORTATION

CY2020

Provider Resource

County:	<u>Santa Clara</u>	Provider:	<u>NORCAL Ambulance</u>	Response Area:	<u>Santa Clara County</u>
Address:	<u>3049 Independence Drive, Suite H Livermore, CA 94551</u>	Number of Ambulances, Air Rescue, or Air Ambulance Vehicles in fleet:		<u>10</u>	
Phone Number:	<u>866.755.3400</u>	Average number of Ambulances and/or Air Rescue Vehicles/Air Ambulances on duty at 12:00 p.m. (noon) on any given day:		<u>8</u>	
		Number of Non-Ambulance Medical Transport Litter Vans (gurney van) and/or wheelchair vans:		<u>0</u>	
Ambulance Strike Team Participant:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Number of Helicopters based in this LEMSA's jurisdiction:		<u>0</u>	

Written ALS Agreement with LEMSA to Participate in EMS System: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Medical Director: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	System Available 24 Hours: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Level of Service:			
			<input checked="" type="checkbox"/> Transport <input type="checkbox"/> Non-Transport	<input type="checkbox"/> ALS <input type="checkbox"/> LALS <input checked="" type="checkbox"/> BLS	<input type="checkbox"/> 9-1-1 <input checked="" type="checkbox"/> 7-Digit <input checked="" type="checkbox"/> CCT <input checked="" type="checkbox"/> IFT	<input checked="" type="checkbox"/> Ground <input type="checkbox"/> Air
			<input type="checkbox"/> Non-Ambulance Medical Transport Services	<input type="checkbox"/> Litter/Gurney Van	<input type="checkbox"/> Wheelchair Van	



TABLE 4: RESPONSE AND TRANSPORTATION

Ownership: <input type="checkbox"/> Public <input checked="" type="checkbox"/> Private	If Public: <input type="checkbox"/> Fire <input type="checkbox"/> Law <input type="checkbox"/> Other _____	If Public: <input type="checkbox"/> City <input type="checkbox"/> State <input type="checkbox"/> Federal	<input type="checkbox"/> County <input type="checkbox"/> Fire District	If Air: <input type="checkbox"/> Rotary <input type="checkbox"/> Fixed Wing	Air Classification: <input type="checkbox"/> Auxiliary Rescue <input type="checkbox"/> Air Ambulance <input type="checkbox"/> ALS Rescue <input type="checkbox"/> BLS Rescue
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Provider Resource (cont.)

CEMSIS Provider ID #: S43-50672

Name of ePCR Vendor: Traumasoft - IPCR

Contract Dates: 07/01/2019 to 06/30/2024

Ground Non-Transporting and/or Transporting Agencies

4,872 Total number of responses
967 Number of emergency responses
3,905 Number of non-emergency responses

Ground Transporting Agencies

3,898 Total number of transports
844 Number of emergency transports
3,054 Number of non-emergency transports

Air Transporting Services

0 Total number of responses
0 Number of emergency responses
0 Number of non-emergency responses

0 Total number of transports
0 Number of emergency transports
0 Number of non-emergency transports

Provider Staff Information

Total number of certified EMTs in the field: 237
 Total number of certified Advanced EMTs in the field: 0
 Total number of certified/accredited Paramedics in the field: 2



TABLE 4: RESPONSE AND TRANSPORTATION

CY2020

Provider Resource

County: <u>Santa Clara</u>	Provider: <u>Silicon Valley Ambulance</u>	Response Area: <u>Santa Clara County</u>
Address: <u>181 Martinvale Lane</u> <u>San Jose, CA 95119</u>	Number of Ambulances, Air Rescue, or Air Ambulance Vehicles in fleet:	<u>9</u>
Phone Number: <u>408.225.2262</u>	Average number of Ambulances and/or Air Rescue Vehicles/Air Ambulances on duty at 12:00 p.m. (noon) on any given day:	<u>3</u>
	Number of Non-Ambulance Medical Transport Litter Vans (gurney van) and/or wheelchair vans:	<u>0</u>
Ambulance Strike Team Participant: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Number of Helicopters based in this LEMSA's jurisdiction:	<u>0</u>

Written ALS Agreement with LEMSA to Participate in EMS System: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Medical Director: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	System Available 24 Hours: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Level of Service: <input checked="" type="checkbox"/> Transport <input checked="" type="checkbox"/> ALS <input type="checkbox"/> 9-1-1 <input checked="" type="checkbox"/> Ground <input type="checkbox"/> Non-Transport <input type="checkbox"/> LALS <input checked="" type="checkbox"/> 7-Digit <input type="checkbox"/> Air <input checked="" type="checkbox"/> BLS <input type="checkbox"/> CCT <input checked="" type="checkbox"/> IFT Other Specialty Services (water, snow, etc.): _____ _____ <input type="checkbox"/> Non-Ambulance Medical Transport Services <input type="checkbox"/> Litter/Gurney Van <input type="checkbox"/> Wheelchair Van
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TABLE 4: RESPONSE AND TRANSPORTATION

Ownership: <input type="checkbox"/> Public <input checked="" type="checkbox"/> Private	If Public: <input type="checkbox"/> Fire <input type="checkbox"/> Law <input type="checkbox"/> Other _____	If Public: <input type="checkbox"/> City <input type="checkbox"/> County <input type="checkbox"/> State <input type="checkbox"/> Fire District <input type="checkbox"/> Federal	If Air: <input type="checkbox"/> Rotary <input type="checkbox"/> Fixed Wing	Air Classification: <input type="checkbox"/> Auxiliary Rescue <input type="checkbox"/> Air Ambulance <input type="checkbox"/> ALS Rescue <input type="checkbox"/> BLS Rescue
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Provider Resource (cont.)

CEMSIS Provider ID #: S43-50876

Name of ePCR Vendor: ImageTrend

Contract Dates: 07/01/2019 to 06/30/2024

Ground Non-Transporting and/or Transporting Agencies

3,850 Total number of responses
84 Number of emergency responses
3,766 Number of non-emergency responses

Ground Transporting Agencies

3,850 Total number of transports
84 Number of emergency transports
3,766 Number of non-emergency transports

Air Transporting Services

0 Total number of responses
0 Number of emergency responses
0 Number of non-emergency responses

0 Total number of transports
0 Number of emergency transports
0 Number of non-emergency transports

Provider Staff Information

Total number of certified EMTs in the field: 27
 Total number of certified Advanced EMTs in the field: 0
 Total number of certified/accredited Paramedics in the field: 5